

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90047 017 ***158.75

DOCUMENT # P99000029625

1. Entity Name
MACMILLAN PROPANE GAS COMPANY OF FLORIDA, INCORPORATED



Principal Place of Business
**1234 NW 79 ST.
 MIAMI, FL 33147**

Mailing Address
**2955 EAST 11TH AVENUE
 HIALEAH, FL 33013**

94058934

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
**c/o Ivan A. Gomez, P.A.
 601 Brickell Key Dr. #507**



04052004 Chg-P CR2E034 (10/03)

City & State
Miami, Florida

Zip
33131

Country
USA

4. FEI Number
65-0917016

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**GOMEZ, JESUS
 2955 EAST 11TH AVENUE
 HIALEAH, FL 33013**

7. Name and Address of New Registered Agent

Name
IAG CORPORATE SERVICES, INC.

Street Address (P.O. Box Number is Not Acceptable)
601 Brickell Key Drive, Suite 507

City
Miami

State
FL

Zip Code
33131

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
IAG CORPORATE SERVICES, INC.

SIGNATURE By: Ivan A. Gomez *IAG* **4/5/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ALONSO, AMANCIO	
STREET ADDRESS	2955 EAST 11TH AVENUE	
CITY-ST-ZIP	HIALEAH, FL 33013	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GOMEZ, JESUS	
STREET ADDRESS	2955 EAST 11TH AVENUE	
CITY-ST-ZIP	HIALEAH, FL 33013	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Amancio Alonso **(305) 371-9213**
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

AMANCIO ALONSO, PRESIDENT