

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFF

DOCUMENT # V06715

1. Entity Name MILANIAN, INC.

FILED Apr 13, 2006 08:00 AM Secretary of State

Principal Place of Business

1808 BRUCE B. DOWNS BLVD. WESLEY CHAPEL, FL 33543-8632 Mailing Address

1808 BRUCE B. DOWNS BLVD. WESLEY CHAPEL, FL 33543-8632



04092006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3099920 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

MILANIAN, SOHAIL 1808 BRUCE B. DOWNS BLVD. WESLEY CHAPEL, FL 33543-8632

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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.					
SIGNATURE.				i	
	Signature, typed or profed name of registered agent and title if	applicable. (NDTE Registered Ag	ent signature	required when reinstating)	DATE
FILE NOWIII FEE IS \$150.00 9. Efection Campaign Finar After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.		¹ 9	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			
TATLE NAME STREET ADDRESS CITY-ST-ZIP	D MILANIAN, SOHAIL 17907 CACHET ISLE DR TAMPA, FL				U00000506396
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MILANIAN, LYNNE 17907 CACHET ISLE DR TAMPA, FL				04/27/06-80020-011 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO N	OT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SPACE
THTLE NAME STREET ADDRESS CITY-S7-ZIP					
TITLE NAME STREET ADDRESS CHY-ST-ZIP				:	
12. I hereby certify that the Information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.					