FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V22081

(6)

MILL-DIRECT CORPORATION

FILED Apr 14 1997 8:00am Secretary of State

|--|

Principal Plac	e of Business	Mailing Address				C 40012 BYERS TIBLE 15015 BOSOT 10181 1101 B1037 B1011 B1014 B1011 B1011 B1011 B1011 B1011 B1011 B1011			
301 YAMATO I	AD .	301 YAMATO RD							
SUITE 4110 BOCA RATON	FI 93431	SUITE 4110 BOCA RATON FL 33431-4930							
US	. = 40.141	US US			3. Date Incorporated or Qualified 03/16/1992	ified 3a. Date of Last Report 05/01/1996			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			oplied For
21		26			65-0319725 Not Applicable				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		City & State			Fee Hequired				
City & State	₽	City & State				6. Election Campaign Financing	m		May Be
23 Zip	Country	28 Zip	Cou	ntrv		Trust Fund Contribution	LJ intensible		to Fees
24	25	29	30	y		This corporation has liability for Florida Statutes		tax under s] No	. 199.032,
	g, Name and Address of Current		120]			10. Name and Address of New Re		-	[
MILL	.WARD, THOMAS E.			81	Name	an dan ak anan makka kaman makkamba jak ana ka maka ja kita adam an kadamba dan kada (1867) kita kada in			
	YAMATO ROAD		-	82	Street Addre	ess (P.O. Box Number is Not Acceptal	ale)		
sun	TE 4110				Judoi nadii	ood (* ,o, box (tallibe) is flot noospial			
BOCA RATON FL 33431				83					
				84	Cily		FI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Stat	lutes, the ab	oove-	named corp	oration submits this statement for the p		changing it	ts registered
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was tions of, Section 607.0505,	s authorized Florida State	l hy ules.	the corporati	oration submits this statement for the poor's board of directors. I hereby acce	ot the appo	ointment as	registered
SIGNATURE	Signature, typod or printed name of registered ages	d and title if aurylicable (N)	OTF: Registered	Anco	d s qualure require	ed when reinstaling)	DATE		
12.	OFFICERS AND		13.		- Tarana tadan	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	P	DELETE	1.1 10	LF		**************************************		Change	Addition
NAME	MILLWARD, THOMAS E		1.2 NA	ME					
STREET ADDRESS	301 YAMATO ROAD, SUITE 41	10	1.3 ST	REET A	ADDRESS				
CITY-ST-ZIP	BOCA RATON FL		1.4 C()	IY-S1-	- ZIP				
TITLE	P	☐ DELETE	2.1 TIT	LF			-	Change	Addition
NAME	MYLES, MICHAEL S	4.6	2.2 NA	ME					ŀ
STREET ADDRESS	301 YAMATO ROAD, SUITE 41	10	2.3 S1	KCET A	ADORESS				
CITY-ST-ZIP	BOCA RATON FL		2. 4 CI		I-ZIP			CT 6.	<u> </u>
TITLE		☐ DELETE	3.1 3/1					Change	Addition
NAME			3.2 NA				÷		
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. CI 4.1 TIT		1 - ZIP			Change	Addition
NAME		ריי אנוונו	4.1 H					onango	E-1 MODITION
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			4.3 310						
TITLE		DELETE	5.1 7(1					Change	Addition
NAME			5.2 NA					-	
STREET ADDRESS					LODRESS				
CITY-ST-ZIP			5.4 CIT						1
TOTLE		DELETE	6.1 117	~				Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 STI	REET A	DDRESS				
CITY-ST-ZIP			6.4 CH						
44 I do heret	y certify that the information supplied	with this films dose not rus				in Section 119 07(3)(i) Florida Statute	e I further	cortify that	the

Information indicated on this annual report or supplementationally find and accurate and that my signature shall have the same legal offect as if made under eath; that I am an officer or director of the corporation or the receipts or trystee/empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an ayachment with an address.