


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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000105503 (1)**

1. Corporation Name

MILLER TOOL & DIE, INC.

Principal Place of Business

**15455 MEADOW WOOD DR
WELLINGTON FL 33414**

Mailing Address

**15455 MEADOW WOOD DR
WELLINGTON FL 33414**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1997

4. FEI Number

65-0805547

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1001 NEWMAN ROAD

Suite, Apt. #, etc.

22 n/a

City & State

23 LAKE PARK FL

Zip

24 33403

Country

25 USA

2a. Mailing Address

26 1001 NEWMAN ROAD

Suite, Apt. #, etc.

27 n/a

City & State

28 LAKE PARK FL

Zip

29 33403

Country

30 USA

9. Name and Address of Current Registered Agent

**DAMSEL, CHARLES H JR
601 B NORTH DIXIE HWY
WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

81 Name CARL MILLER

82 Street Address (P.O. Box Number is Not Acceptable)

1001 NEWMAN ROAD

83

84 City LAKE PARK

FL

85 Zip Code

33403

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Carl R. Miller, President

CARL MILLER, PRESIDENT

4/29/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSD** ☐ DELETE

NAME **MILLER, CARL R**
STREET ADDRESS **15455 MEADOW WOOD DR**
CITY - ST - ZIP **WELLINGTON FL 33414**

TITLE **VTD** ☐ DELETE

NAME **MILLER, REBECCA A**
STREET ADDRESS **15455 MEADOW WOOD DR**
CITY - ST - ZIP **WELLINGTON FL 33414**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Carl R. Miller, President

CARL MILLER, PRESIDENT

4/29/98

CR2E034 (10/97)