

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752691

FILED
Feb 18, 2013
Secretary of State
CC8683778341

Entity Name: MILLER GARDENS INC.

Current Principal Place of Business:

C/O THE CONTINENTAL GROUP
5805 BLUE LAGOON DRIVE SUITE 310
MIAMI, FL 33126

Current Mailing Address:

C/O THE CONTINENTAL GROUP
5805 BLUE LAGOON DRIVE SUITE 310
MIAMI, FL 33126

FEI Number: 59-2194449

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARIN , EL JAIEK AND LOPEZ, PL
2601 SOUTH BAYSHORE DRIVE SUITE 700
COCONUT GROVE, FL 33133 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name GAMEZ, ALFREDO
Address C/O THE CONTINENTAL GROUP
5805 BLUE LAGOON DRIVE SUITE 310

City-State-Zip: MIAMI FL 33126

Title TREASURER
Name FADHEL, MARGARITA
Address 5900 SW 127TH AVE, APT 3105
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name HERNANDEZ, TERESITA
Address C/O THE CONTINENTAL GROUP
5805 BLUE LAGOON DRIVE SUITE 310

City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name LAZO, LUCIA
Address C/O THE CONTINENTAL GROUP
5805 BLUE LAGOON DRIVE SUITE 310

City-State-Zip: MIAMI FL 33126

Title VP
Name GARCIA, ANA S
Address C/O THE CONTINENTAL GROUP
5805 BLUE LAGOON DRIVE SUITE 310

City-State-Zip: MIAMI FL 33126

Title SECRETARY
Name SCALISE, GLORIA
Address 5800 SW 127TH AVE, APT 2209
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name CAMPS, CECILIA
Address 5700 SW 127TH AVE, APT 1207
City-State-Zip: MIAMI FL 33183

Title DIRECTOR
Name CHAVEZ, THELMA
Address C/O THE CONTINENTAL GROUP
5805 BLUE LAGOON DRIVE SUITE 310

City-State-Zip: MIAMI FL 33126

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALFREDO GAMEZ

PRESIDENT

02/18/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name NOVO, MIRIAM
Address C/O THE CONTINENTAL GROUP
 5805 BLUE LAGOON DRIVE SUITE 310
City-State-Zip: MIAMI FL 33126