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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 332943

(0)

MILLER BROTHERS OF FLORIDA, INC.

FILED Jan 20 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | T TO BILED ELLEB EARING ALBAN DER DID DO THAT BERNIN DER NA | i Bibii bibii Bibii Bibii 1881 | | |
|---|---|-------------------------|--------------------------|---|---|--|--|
| 4614 SOUTH HIGHWAY 41 4614 SOUTH HIGHWAY 41 PO BOX 1098 PO BOX 1098 | | | | | DO NOT WRITE IN THIS SPACE | | |
| RIVERVIEW FL 33569 RIVERVIEW FL 33569 | | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified | | |
| | | | | | 07/25/1968 | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number | Applied For | |
| 21 26 | | | | | 59-1216296 | Not Applicable | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27 | | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State | City & State City & State | | | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip | Country | Country Zip Co | | у | 8. This corporation owes or has paid the cu | rrent year Intangible | |
| 24 | 25 29 30 | | 0 | | Personal Property Tax due June 30. Yes X No | | |
| g, Name and Address of Current Registered Agent | | | | T &1 | 10. Name and Address of New Registered | Agent | |
| MILLER JR,EDWARD J | | | | Name | | | |
| 8849 W. MILLPOINT ROAD | | | 82 | Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| RIVERVIEW FL 33569 | | | 83 | | · · · · · · · · · · · · · · · · · · · | | |
| | | | 84 | City | | 85 Zip Code | |
| | | | | | FL | . | |
| 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 Signature, typed or printed name of registered agent and liftin if applicable (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | |
| 12, | | ND DIRECTORS | 13. | one organizate requ | ADDITIONS/CHANGES TO OFFICERS AND | D DIRECTORS IN 12 | |
| TITLE | PD | ☐ DELETE | 1.1 TOTLE | | | Change Addition | |
| NAME | MILLER JR,EDWARD J | | 1.2 NAME | | | | |
| STREET ADDRESS | ADDRESS 8849 W. MILLPOINT RD | | 1.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | RIVERVIEW FL 1.4 | | 1.4 CITY- | ST - ZIP | | | |
| TITLE | — — — — — — — — — — — — — — — — — — — | | 2.1 TITLE | | | ☐ Change ☐ Addition | |
| NAME | Automit de auton 11 | | 2.2 NAME | | | | |
| STREET ADDRESS | 1 9000 111122211 9111 | | 2.3 STREE | T ADDRESS | | | |
| CITY-ST-ZIP | | | 2. 4 CITY - | ST-ZIP | | | |
| TITLE | ' ' | | 3.1 TITLE | | | ☐ Change ☐ Addition | |
| NAME . | meand on an im | | 3.2 NAME | | | | |
| STREET ADDRESS | The second second second | | | T ADDRESS | | | |
| CITY+ST-ZIP TITLE | | | 3.4. CITY - 4.1 TITLE | SI-ZIP | | Change Addition | |
| NAME | | | 4.7 ITEE | | | The supplier of the supplier o | |
| STREET ADDRESS | | | | T ADDRESS | | ŀ | |
| CITY-ST-ZIP | | | 4.4 CITY-5 | | | | |
| TITLE | | DELET E | 5.1 TITLE | ,, <u>, , , , , , , , , , , , , , , , , ,</u> | | ☐ Change ☐ Addition | |
| NAME | | | 5.2 NAME | | | · • • | |
| STREET ADDRESS | 1 | | 5.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY-5 | | | | |
| TITLE | De ete | | 6.1 TITLE | | | ☐ Change ☐ Addition | |
| NAME | 6.2 | | 6.2 NAME | | | | |
| STREET ADDRESS | | | 6.3 STREE1 | ADDRESS | | 1 | |
| CITY-\$1-ZIP 6.4 C | | | 6.4 CITY - 5 | ST-ZIP | | | |
| 44 16 | Light the state of the comment of the state | 24 41 2 422 1 4 4 104 4 | | | 446.69(6)(6) | 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |

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 no an attachment with an address.