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 # 1. Corporation Name

Principal Place of Business

556289

(7)

Mailing Address

MILLER AND SONS, INC.

FILED Feb 24 1998 8:00am Secretary of State



| C/O JAMES I HIGHWAY 98 EASTPOINT F | AND FIRST STREET | C/O JAMES H. MILLER HIGHWAY 98 AND FIRS EASTPOINT FL 32328-96 | | DO NOT WRITE IN THIS | SPACE |
|--|--|---|------------------------------------|--|---------------------------|
| | | | | 3. Date Incorporated or Qualified 01/01/1978 | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 59-1783925 | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 6. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | 6, Certificate of Status Desired | Fee Required |
| City & State | e | City & State | | 8. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the cu | rrent year Intangible |
| 24 | 25 | 29 | 30 | | Yes No |
| | 9. Name and Address of Curr | ent Registered Agent | | 10. Name and Address of New Registered | Agent |
| | LER, JAMES H. | | 81 Name | | |
| HIGHWAY 98 | | | 62 Street Add | dress (P.O. Box Number is Not Acceptable) | |
| EASTPOINT FL 32328-9601 | | | 000 | A COUNTY OF THE PROPERTY OF TH | |
| | | | 83 | | |
| | | | 24 00 | | 71 4 1 |
| | | | 84 City | Fi | 85 Zip Code |
| 11. Pursuant t | to the provisions of Sections 607.05 | 502 and 607.1508, Florida Statu | tes, the above-named cor | noration submits this statement for the nurnose of | f changing its registered |
| Office or re | egistered agent, or both, in the Sta m familiar with, and accept the obli | le of Florida. Such change was | authorized by the coroora | ation's board of directors. I hereby accept the app | pointment as registered |
| _ | Trainia Will, and decopt the ben | igations of, occitor our outo, in | onda otatutes. | | |
| SIGNATURE | Signature, typed or printed name of registered a | gent and tile (applicable (NO) | E: Registered Agent signature requ | uired when reinstating) DATE | |
| 12. | | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND | DIRECTORS IN 12 |
| TITLE | DP . | DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | MILLER, JAMES H | | 1.2 NAME | | - |
| STREET ADDRESS | HIGHWAY 98 | | 1.3 STREET ADDRESS | | , |
| CITY - ST - ZIP | EASTPOINT FL 32328 | | 1.4 CITY-ST-ZIP | | |
| TITLE | SDT | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME | MILLER, JEANETTE H | | 2.2 NAME | | |
| STREET ADDRESS | HIGHWAY 98 | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | EASTPOINT FL 32328 | | 2. 4 CITY - ST - ZIP | Type (1) | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| | | | I | | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | L. J DECCTE | | | - Onlinge - Audulton |
| | | | 4.2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | DELETT | 4.4 CITY-ST-ZIP | <u> </u> | T AL |
| TITLE | | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | <u> </u> | | 5.4 CITY - ST - ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| 1 | | | = 1 | | ī. |

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.