

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2005 8:00 am
Secretary of State

08-09-2005 90001 036 ***150.00

DOCUMENT # 577149

1. Entity Name
HENRY MILLER, P.A.



Principal Place of Business
**507 SW 3RD STREET
BELLE GLADE, FL 33430**

Mailing Address
**507 SW 3RD STREET
BELLE GLADE, FL 33430**

JUUUUUU13



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05202005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number
59-1878060

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MILLER, HENRY
507 SW 3RD STREET
BELLE GLADE, FL 33430**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW!!! FEE IS \$650.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
MILLER, HENRY
507 SW 3RD STREET
BELLE GLADE, FL 33430** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
MILLER, HARMA
507 SW 3RD STREET
BELLE GLADE, FL 33430** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY - ST - ZIP
**T
MILLER, HARVA
507 SW 3RD STREET
BELLE GLADE, FL 33430** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP
**V
MILLER, HEATH
507 SW 3RD STREET
BELLE GLADE, FL 33430** ☐ Delete

TITLE
NAME
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CITY - ST - ZIP
☐ Change ☐ Addition

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CITY - ST - ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Henry Miller* **HENRY MILLER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug. 5, 2005

Date

Daytime Phone #

ATTACHMENT

#577149

50060615

Henry Miller, P.A. DBA

Miller Motoring

507 S.W. 3rd Street

Belle Glade, Florida 33430

August 5, 2005

Division of Corporations
Annual Report Section

P.O. Box 6850

Tallahassee, Florida 32314

Please be advised, that I did not receive annual
report in time that I could have filed it back
to your office before now. Enclosed is my check
#1040 in the amount of \$150.00. I thank this
office in advance for your service.

Respectfully

Henry L. Miller

ID#

59-1878060