PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	page 10f 2
DOCUMENT # 64388	SE SER 20 1010:31	
1. Corporation Name 1996		SECHEN JWY OF STATE WALLAM STATE, FLORIDA
MILLER & MILLER, P.A. AMNUAL REPORT		
Principal Place of Business 100 S. DIXIE HWY, SUITE 201 BLACKSTONE BUILDING W PALM BCH FL 33401 If above addresses are incorrect in any way, line terror	Mailing Address 100 S. DIXIE HWY. SUITE 201 BLACKSTONE BUILDING W PALM BCH FL 33401	3:0:00195:4:4 -10/04735-01058-003 ******8.75 ******6.75
1 above addresses are incorrect in any way, me ender 2. New Principal Office Address, If Applicable 2222 LAKEVIEW AVE., SHE AND	222 LAKEVIEW AVE.	4. Date Incorporated or Qualified To Do Business in Florida 11/02/1979
Suite, Apt. #, etc. SUITE 280	SUILE, Apt. #, etc. SUITE 280	5. FEI Number Applied For 59-1948781 Not Applicable
City & State WEST PALM BEACH, FL	WEST PALM DEACH, FL	6. CERTIFICATE OF STATUS DESIRED A Status
33401-L146 113A 7. Names and Street Addresses of Each Officer and/o	or Director (Florida nonprofit corporations must list at le	ast 3 directors) =;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
Name of Officers Title(s) and/or Directors 1 2	Street Address of Eac Officer and/or Directo 3 (Do NOT Use Post Office Box	-1U/U%/⊅0iv/2state/2p 0057 Numbers) 4 ★★★★225,00 ★◆★★225,00
PD MILLER, ELAINE FRANCES		W PALM BCH, FL 00000
- SD MILLER, ALAN JEFFREY	100-S DIXIE HWY, #201	W PALM BCH, FL 00000
P MILLER, ELAINE		#
V MILLER, ALAN J.	222 LAKEVIEW AV	Q. alaw 9-10-96
8. Name and Address of Current Registered Agent 9. Name and Address of New Régistered Agent / Name MILLER, ELAINE F.		
MILLER FLAINE F. Street Address ((P.O. Box Number is Not Acceptable) AKEVIEW AYE.
BLACKSTONE BUILDING		= 280
WEST PALM BEACH FL 33401		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent BEGISTERED AGENT MUST SIGN REGISTERED AGENT MUST SIGN		
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes V No (See other side for information on intangible tax.)		
12.1 certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

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Alan J. Miller* Elaine F. Miller* *Florida Bar Board Certified Civil Trial Attorney Attorneys and Counsellors at Law Esperante Building, Suite 280 222 Lakeview Avenue West Palm Beach, Florida 33401

Tel: [561]655-4118 Fax: [561]655-4359

Miller 8

September 19, 1996

Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

RE: Non-Receipt of Annual Corporate Registration

Dear Sir/Madam:

Per the telephone conversation my Office Manager had with your office today, I am writing to officially advise that the law firm of Miller & Miller, P. A. has never received the Annual Corporation Registration by U.S. Mail.

We had previously sent to the Division of Corporations an address announcement advising of same. Our first notification of delinquency arrived by mail today with a postal address change sticker. However, again may I state we have not ever received the original Annual Corporation Registration package nor any additional Notice for payment by U. S. Mail postal delivery service.

I, therefore, ask that your office please note the corrected address information on the enclosed form and that you waive the reinstatement fee.

I have enclosed a check in the amount of \$225.00 and a separate check in the amount of \$8.75 for a Certificate of Status. Thank you for your attention to this matter.

Please contact my office at your earliest opportunity regarding same.

Cordially,

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Elaine F. Miller EFM/ps

Enclosures