# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 13, 2009**
**Secretary of State**

DOCUMENT# 752691

**Entity Name:** MILLER GARDENS INC.

**Current Principal Place of Business:**

C/O THE CONTINENTAL GROUP
11981 SW 144 CT, #201
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

C/O THE CONTINENTAL GROUP
11981 SW 144 CT, #201
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number: 59-2194449** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HYMAN & KAPLAN
MUSEUM TOWER, 27TH FLOOR
150 WEST FLAGLER STREET
MIAMI, FL 33130 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: GAMEZ, ALFREDO
Address: 5900 SW 127 AVE, APT 3312
City-St-Zip: MIAMI, FL 33183

Title: T ( ) Delete
Name: FADHEL, MARGARITA
Address: 5900 SW 127TH AVE, APT 3105
City-St-Zip: MIAMI, FL 33183

Title: VP ( ) Delete
Name: AGUIAR, PILAR I
Address: 5700 SW 127TH AVE, APT 1219
City-St-Zip: MIAMI, FL 33183

Title: S ( ) Delete
Name: CAAMANO, SILVIA
Address: 5800 SW 127TH AVE, APT 2111
City-St-Zip: MIAMI, FL 33183

Title: P ( ) Delete
Name: CHAVEZ, THELMA
Address: 9633 SW 134 PL
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: LAZO, LUCIA
Address: 5800 SW 127TH AVE, APT 2220
City-St-Zip: MIAMI, FL 33183

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARGARITA FADHEL T 03/13/2009
Electronic Signature of Signing Officer or Director — Date