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 F58921

(0)

MILLER WOODCRAFT, INC.

FILED Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4244 PETERS RD 4244 PETERS RD FT LAUDERDALE FL 33317 FT LAUDERDALE FL 33 2. Principal Place of Business 2a. Mailing Address				3. Date Incorpora 12/15/1981 4. FEI Number			Applied For		
Suite, Ap1 #, etc.		Suite, Apt. #, etc.				59-2281162			ot Applicable Additional
22 27						5. Certificate of Status Desired Fee Required			
City & State	Θ.	City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees
Zip 24	Country 25	Zip	Cour	itry	l	 This corporation owes or has p Personal Property Tax due Jun 			ntangible No
[24]	g, Name and Address of Current	11	[30]			10. Name and Address of New R			<u></u>
MIL	LER, SIDNEY			81 Nam					
4244 PETERS ROAD				82 Stree	t Addres	s (P.O. Box Number is Not Accepta	able)		
PLANTATION, FL			Ĺ						
			ľ	B3					
Ì			Ī	B4 City			EI	85 Zip	Code
SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obligation of support the state of registered agent of FICERS AND	ot and title if applicable (NO) DIRECTORS	TE: Registered	Agent signalu		s board of directors. I hereby accombine the stating of the statin	DATE	DIRECTOR	RS IN 12
THILE	STD DORCOTA	☐ DELETE	1.\$ TITU					Change	☐ Addition
NAME PROFES ADDRESS	MILLER, ROBERTA 4244 PETERS ROAD		1.2 NA		.				j
STREET ADDRESS CITY-ST-7IP	FT LAUDERDALE, FL 00000			EET ADDRESS /-st-zip	`]
TITLE	PD	DELETE	2.1 7171		1	*****		Change	Addition
NAME	MILLER, SIDNEY		2.2 NA	Æ					l
STREET ADDRESS	4244 PETERS ROAD		2.3 STR	eet address	3				
CITY-ST-ZIP	FT LAUDERDALE, FL 00000			Y-ST-ZIP	_				
TITLE		☐ DELETE	3.1 TITE					Change	☐ Addition
NAME CIRCET ADDRESS			3.2 NAM	ae Eet address					
STREET ADDRESS CITY-ST-ZIP				eet address Y-ST-Zip	`				
TITLE		DELETE	4.1 TITL		+		-	Change	Addition
NAME)			4. 2 NA	ME	Ì				1
STREET ADDRESS			4.3 STA	eet address	5				ŀ
CITY-ST-ZIP		T becat		r-ST-ZIP					Advers
TITLE		☐ DELETE	5.1 TITI				ļ	Change	Addition
NAME STREET ADDRESS			5.2 NAM	ae Eet address					ł
CITY-ST-ZIP			1	ee 7 aookess (- ST - ZIP	`				
TITLE		DELETE	6.1 TITL		 			Change	Addition
NAME			6.2 NAM	AE					
STREET ADDRESS			6.3 STR	EET ADDRESS	s				\
CITY-ST-ZIP	partify that the information supplied will			-ST-ZIP		notion 110 07/2Vi). Florida Statutas		Cr. al. 's co's	

rifereby certify mat the information supplied with this hilling does not quality 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 applicas.