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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F99233** **(1)**

1. Corporation Name
HOWARD S. MILLER, P.A.

Principal Place of Business	Mailing Address
4030-C SHERIDAN STREET HOLLYWOOD FL 33021	4030-C SHERIDAN STREET HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/13/1982

2. Principal Place of Business 21: 10000 Stirling Road	2a. Mailing Address 26: 10000 Stirling Road
Suite, Apt. #, etc 22: 1	Suite, Apt. #, etc 27: 1
City & State 23: Cooper City, Florida	City & State 28: Cooper City, Florida
Zip 24: 33024 / Country 25:	Zip 29: 33024 / Country 30:

4. FEI Number: 59-2218684 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MILLER, HOWARD S 4030-C SHERIDAN ST HOLLYWOOD, FL 33021	81 Name: MILLER, HOWARD S. 82 Street Address (P.O. Box Number is Not Acceptable): 10000 Stirling Road, 83: Suite 1 84 City: Cooper City FL 85 Zip Code: 33024

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Howard S. Miller — HOWARD S. MILLER — DATE: 2/5/98
Signature, typed or printed name of the person signing and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MILLER, HOWARD S 4030-C SHERIDAN ST HOLLYWOOD, FL 00000	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD HOWARD S. MILLER 10000 Stirling Road, Suite 1 Cooper City, Florida 33024	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/97)

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.

SIGNATURE: Howard S. Miller — HOWARD S. MILLER — 2/5/98 — (954) 450-5400