

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

ICATION  
OR  
TEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

ENT # G03792

MILLER, INC.

Business

Mailing Address

A1A LIQUORS  
P O BOX 275  
YULEE FL 32097 32041

uses are incorrect in any way, line through incorrect information and enter correction below.

Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc

City & State

Country

Zip

32041

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/08/1982

5. FEI Number

59-2224887

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Name of Officers  
and/or Directors

3

Street Address of Each  
Officer and/or Director

4

City / State / Zip

NNA, FRANK J

1534 GLENWOOD RD.

YULEE FL 32097

RGAN, DANNA MARY

1534 GLENWOOD RD.

YULEE FL 32097

INA, MAURO S

1534 GLENWOOD RD.

YULEE FL 32097

8. Name and Address of Current Registered Agent

MARY  
WOOD RD.  
32097

no longer

9. Name and Address of New Registered Agent

Name

FRANK J. DIANNIT

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

1268 QUATTLE FIELD LANE

Suite, Apt. #, Etc.

AME

City

AMELIA ISLAND

State

Zip Code

FL

32034

I, the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

REGISTERED AGENT MUST SIGN

Date

10/27/03

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  
present 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  
corporate 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  
ation is true and accurate, and my signature shall have the same legal effect as if made under oath.

E:

FRANK J DIANNA 10/27/03

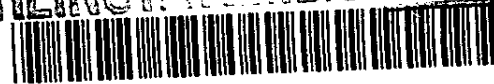
1-9  
4

FILED

04 JAN -8 PM 12:45

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

REINSTATEMENT 03



800024337558  
01/08/04--01013--012 \*\*\$800.00

800024337558  
10/31/03--01080--010 \*\*\$150.00

CR2040 (7/03)