FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 3:39

DOCUMENT # H84913 (3)

1. Corporation Name
HARRY S. MILLER, INC.

Principal Place of Business	Mailing Address
175-A NORTHWEST FIRST STREET P.O. BOX 1072 DEERFIELD BEACH FL 33443	175-A NORTHWEST FIRST STREET P.O. BOX 1072 DEERFIELD BEACH FL 33443

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/12/1985
3a. Date of Last Report: 04/25/1994

2. Principal Place of Business
21: P.O. Box 5807
22: Suite, Apt. #, etc.
23: City & State: Lake Worth FL
24: Zip: 33466
25: Country: USA

2a. Mailing Address
26: P.O. Box 5807
27: Suite, Apt. #, etc.: LAKE WORTH
28: City & State: FL.A.
29: Zip: 33466
30: Country: U.S.A.

4. FEI Number: 59-2602364 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MILLER, HARRY S.
#6 AND #8
175-A N.W. 1ST STREET
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name: Miller, Harry S.
82 Street Address (P.O. Box Number is Not Acceptable): 3863 Woods Walk Blvd.
83:
84 City: Lake Worth FL 85 Zip Code: 33467

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: Harry S Miller Jnr. DATE: 3-23-95
Signature, typed or printed name of registered agent 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	PST	11 TITLE	President	☒ Change ☐ Addition
NAME	MILLER, HARRY S.	12 NAME	Miller, Harry S -	
STREET ADDRESS	175-A NW 1ST STREET	13 STREET ADDRESS	3863 Woods Walk Blvd.	
CITY-ST-ZIP	DEERFIELD BEACH FL	14 CITY-ST-ZIP	Lake Worth, FL 33467	
TITLE	D	21 TITLE	D	☒ Change ☐ Addition
NAME	MILLER, HARRY S.	22 NAME	Miller, Harry S.	
STREET ADDRESS	175-A NW 1ST STREET	23 STREET ADDRESS	3863 Woods Walk Blvd.	
CITY-ST-ZIP	DEERFIELD BEACH FL	24 CITY-ST-ZIP	Lake Worth, FL 33467	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Harry S Miller Jnr. 3-23-95 (407)-433-5454
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

043B002 FP