

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H93236

(8)

1. Corporation Name

RICK MILLER ENTERPRISES, INC.

Principal Place of Business

103 S. BLVD.
TAMPA FL 33606
US

Mailing Address

103 S. BLVD.
TAMPA FL 33606
US

2. Principal Place of Business

2a. Mailing Address

21 6706 Pemberton Oaks Ct

26 6706 Pemberton Oaks Ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Seffner, Florida

28 Seffner, Florida

Zip

Country

Zip

Country

24 33584

25 USA

29 33584

30 USA

9. Name and Address of Current Registered Agent

MILLER, RICK D.
103 S. BLVD.
TAMPA FL 33606

81 Name

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

6706 Pemberton Oaks Ct

83

84 City

Seffner

FL

85 Zip Code

33584

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

Rick D Miller

Signature, typed or printed name of registered agent and filer, if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

4-1-96

12. OFFICERS AND DIRECTORS

TITLE D
NAME MILLER, RICK D.
STREET ADDRESS 103 S. BLVD.
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1 NAME Miller Rick D
12 STREET ADDRESS 6706 Pemberton Oaks Ct.
14 CITY-ST-ZIP Seffner, Florida 33584

2 NAME
22 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

3 NAME
32 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

4 NAME
42 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

5 NAME
52 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

6 NAME
62 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

7 NAME
72 STREET ADDRESS
74 CITY-ST-ZIP

☐ Change ☐ Addition

8 NAME
82 STREET ADDRESS
84 CITY-ST-ZIP

☐ Change ☐ Addition

9 NAME
92 STREET ADDRESS
94 CITY-ST-ZIP

☐ Change ☐ Addition

10 NAME
102 STREET ADDRESS
104 CITY-ST-ZIP

☐ Change ☐ Addition

11 NAME
112 STREET ADDRESS
114 CITY-ST-ZIP

☐ Change ☐ Addition

12 NAME
122 STREET ADDRESS
124 CITY-ST-ZIP

☐ Change ☐ Addition

13 NAME
132 STREET ADDRESS
134 CITY-ST-ZIP

☐ Change ☐ Addition

14 NAME
142 STREET ADDRESS
144 CITY-ST-ZIP

☐ Change ☐ Addition

15 NAME
152 STREET ADDRESS
154 CITY-ST-ZIP

☐ Change ☐ Addition

16 NAME
162 STREET ADDRESS
164 CITY-ST-ZIP

☐ Change ☐ Addition

17 NAME
172 STREET ADDRESS
174 CITY-ST-ZIP

☐ Change ☐ Addition

18 NAME
182 STREET ADDRESS
184 CITY-ST-ZIP

☐ Change ☐ Addition

19 NAME
192 STREET ADDRESS
194 CITY-ST-ZIP

☐ Change ☐ Addition

20 NAME
202 STREET ADDRESS
204 CITY-ST-ZIP

☐ Change ☐ Addition

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)(k), 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:

Rick D Miller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rick D Miller

4-1-96

813-689-0282

Date Telephone #

CR2E034 (12/95)