05-04-1999 90200 041 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # In2070

1. Corporation Name FRANK MICHAEL MILLER BUILDER, INC.													
Principal Place of Business Mailing Address							•		i f oo itin nen danid febti ansn sagit ags asket bibit		() 81811 47821 1881		
2995 MILLER AVENUE 2995 MILLER AVENUE ORANGE CITY FL 32763 ORANGE CITY FL 32763									DO NOT WRITE IN THIS S	PACE	`		
									Date Incorporated or Qualifed 03/03/1986				
2. Principal Place of Business 2a. Mailing Address									FEI Number		Applied For		
21				26					59-2654429		Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				\$8.75 Additional					
22				27				5. Certificate of Status Desired Fee Required					
City & State				City & State			6. Election Campaign Financing \$5.00 May Be						
23				28					Trust Fund Contribution Added to Fees				
Zip	Zip Country			Zip Cou				1	8. This corporation owes the current year Intangible				
24	25 29 3				0				Personal Property Tax.				
	9. Name and	Address of Current	Regi	stered Agent		[10.	Name and Address of New Registered Ag	ent			
						31	Name						
MILLER, FRANK MICHAEL						82 Street Address (P.O. Box Number is Not Acceptable)							
2995 MILLER AVENUE													
ORANGE CITY FL 32763						33							
						14	City		FL 85 Zip Code				
11. Pursuant office or reagent. I as	m familiar with, a	ind accept the obligat	ions o	r, Section 607.0505, Flori	ga Statut	es.			n submits this statement for the purpose of cheard of directors. I hereby accept the appointn	anging nent as	its registered registered		
	Signature, typed or pri		: Registered Agent signature require					DIDEO	TODE IN 42				
12.		C OFFICERS AN	D DIRI		13.				ADDITIONS/CHANGES TO OFFICERS AND	Chang			
TITLE	PD			☐ DELETE	1.1 TITL				L	0.10(1)	geAodition		
NAME	Miller, 115 dil Mora ille					2 NAME							
STREET ADDRESS						1.3 STREET ADDRESS							
CITY-ST-ZIP	ORANGE CIT	Y FL			1.4 CITY		r-ZIP			□ Chanc	e		
TITLE	* '					2.1 TITLE			L	_ Chang	Je [_] Addition [
NAME	manufacture of the second of t					. 2.2 NAME							
STREET ADDRESS						2.3 STREET ADDRESS							
CITY-ST-ZIP	ORANGE CITY FL					2. 4 CITY-ST-ZIP							
ши́т	_			DELETE	3.1 TITU	E			ŧ.	_] Chang	ge Addition		
NAME					3.2 NAM	E							
STREET ADDRESS					3.3 STR	EET	ADDRESS						
CITY-ST-ZIP					3 4, CIT		T-ZIP			70			
TITLE				☐ DELETE	4.1 TITU	E			l	Chang	ge		
NAME					4. 2 NAM	Æ							
STREET ADDRESS 4.3 S						EET	ADDRESS						
CITY-ST-ZIP					4.4 CITY	-ST	r-ZIP						
TITLE				☐ DELETE	5.1 TITL				Ι	Chang	ge 🔲 Addition		
					5.2 NAM	E							

CITY-ST-ZIP 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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Frank M. M. Mer 4-26-99 904-775017/

☐ Change

☐ Addition