2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Feb 13, 2006 08:00 AM Secretary of State

DOCUMENT # J40154 1. Entity Name MILLER TOOL AND REPAIR, INC.							
Principal Place 88 TRUMAN NAPLES, FL	CIRCLE	Mailing Address 88 TRUMAN CIRCLE NAPLES, FL 34104	US		1 1221112 211	e wirde water i takk bibli wire wielt biete wie	· 명단 중간점에 중간중대 중인조대통제 /1 1 1 mps
DO NOT WRITE IN THIS S			PA	Tribunds		Applied For Not Applicable \$8.75 Additional	
88 TRUMA NAPLES, I	ATRICK W IN CIRCLE FL 34104	DO NOT WRITE IN THIS SPACE					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or priviled name of registered agent and tide of applicable INDIE, Registered Agent signature required when reinstalling) OATE FILE NOW!!! FEE IS \$150.00 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution Added to Fees							
File NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Con					.00 May Be ed to Fees	02/2 2/ 06-8005 	7-022 150.00
10. ISLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIE PST MILLER, PATRICK W 88 TRUMAN CIRCLE NAPLES, FL 34104					NOT WRIT	}
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further carrity that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver outcustee empowered to execute this record as required by Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 if							