

5/12

FILED

May 30, 2002 8:00 am  
Secretary of State

05-12-2002 90576 045 \*\*\*150.00

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # LD/0000056121. Entity Name  
KILO MIKE LLC**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

149 SE 2<sup>ND</sup> AV

Suite, Apt. #, etc.

DNA

3. Mailing Address

149 SE 2<sup>ND</sup> AVE

Suite, Apt. #, etc.

DNA

City &amp; State

POMPANO BEACH, FLA

City &amp; State

POMPANO BEACH, FLA

Zip

33060

Country

USA

Zip

33060

Country

USA

4. FEI Number

36-3838346

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
ERNEST KOLLRA, P.A.

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

1995 E. OAKLAND PARK BLVD #300

City

FT. LAUDERDALE

FL

Zip Code

33306**DO NOT WRITE  
IN THIS SPACE**

8. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRES  
KENNETH MILLER  
149 SE 2<sup>ND</sup> AVE  
POMPANO BEACH, FLA 33060TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
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CITY-ST-ZIP**DO NOT WRITE  
IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth Miller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH MILLERAPR 12 2002

Date

954 366 4034

Daytime Phone #

CR2E034B (12/01)