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PROFIT CORPORATION ANNUAL REPORT

1996

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

FILED
Apr 01 1996 8:00 am
Secretary of State

DOCUMENT # **L65894** **(2)**

1. Corporation Name
MILLER U.S.A. CORP.

Principal Place of Business	Mailing Address
% KEITH A. JAMES 777 S. FLAGLER DRIVE. SUITE 310 E. W. PALM BEACH FL 33401	% KEITH A. JAMES 777 S. FLAGLER DRIVE. SUITE 310 E. W. PALM BEACH FL 33401

3. Date Incorporated or Qualified: **04/17/1990**
3a. Date of Last Report: **04/24/1995**

4. FEI Number: **98-0110325** ☐ 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

2. Principal Place of Business	2a. Mailing Address
21 777 South Flagler Drive	26 777 South Flagler Drive
Suite, Apt. #, etc. 22 Suite 310 East	Suite, Apt. #, etc. 27 Suite 310 East
City & State 23 West Palm Beach FL	City & State 28 West Palm Beach FL
Zip 24 33401 Country 25 Palm Beach	Zip 29 33401 Country 30 Palm Beach

9. Name and Address of Current Registered Agent

JAMES, KEITH, A.
777 S.FLAGLER DRIVE
SUITE 310 E.
W. PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name: Laurie L. Gildan
82 Street Address (P.O. Box Number is Not Acceptable): 777 South Flagler Drive
83 Suite 310 East
84 City: West Palm Beach **FL** 85 Zip Code: 33401

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: _____ March 25, 1996
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature is required when not listed) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, JAMES 285 CLARKE AVE. #501 WESTMOUNT,QUEBEC,CAN	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D/P	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, JOHN 320 COTE ST. ANTONINE RD WESTMOUNT,QUEBEC,CAN	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D/V	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	S/T Jack Kaye 26 Chauret Pl. Dollard-des-Ormeaux, Qc., Canada	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	300001765593 -04/02/96--01009--009 ***200.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

JV 4.1

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: _____ James Miller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(514) 342-0040
Daytime Phone #

CR2E034 (12/95)