

## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M03856

1. Entity Name MILLER PROPERTIES, INC.

Principal Place of Business

Mailing Address

614 S. FEDERAL HWY. 614 S. FEDERAL HWY. FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301

FILED Jul 07, 2004 08:00 AM Secretary of State



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06282004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2440200

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

MILLER, TOM 614 S. FEDERAL HWY, SUITE 700 FT. LAUDERDALE, FL 33301

## 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE IS \$150.00  Due by September 8, 2004  9. Election Campaign Fina Trust Fund Contribution		cing 🗆	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10.	OFFICERS AND DIF	RECTORS	1	· · · · · · · · · · · · · · · · · · ·	<u> </u>
TUTLE NAME STREET ADDRESS CITY-ST-ZIP	DP MILLER, TOM 614 S FEDERAL HWY FT. LAUDERDALE, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000163562 07/07/04-80007-017 150.00
TITLE NAME STREET ADDRESS CITY -ST - ZIP				DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like appowered.					