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

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE

14. Thereby certify that the information supplyindicated on this agreed report or supplyin officer or director only cooperation or nee Block 12 or Block 13 if changed, or or are

FILED PROFIT Mar 13 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name M66273 (7) JOHN P. MILLER C.P.A., P.A. Principal Place of Business Mailing Address 2499 GLADES RD 2499 GLADES RD STE 305A STE 305A **BOCA RATON FL 33431** BOCA RATON FL 33431 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/25/1988 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0025709 21 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Z_{1D} 8. This corporation owes or has paid the curre t year Intangible Yes □ Ño 24 Personal Property Tax due June 30. 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name MILLER, JOHN P 2499 GLADES RD 82 Street Address (P.O. Box Number is Not Acceptable) **STE 305A** 83 **BOCA RATON FL 33431** 84 City Zip Code 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 Signature, typed or posited transe of registers diagonal and title diapplicable. (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE 1.1 TITLE Change Addition TITLE MILLER, JOHN P. CPA 1.2 NAME NAME 2499 GLADES RD, STE 305A STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE TITLE 2 2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change 31 TITLE 3.2 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 5.1 TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE Change 6.1 TITLE

> 6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an apowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in