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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # K.E. MILLER TRANSPORTATION, INC.

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SIGNATURE:

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(5)

FILED Apr 14 1998 8:00am Secretary of State



L <u></u> -							
Principal Place of Business Mailing Address					* ************************************	aran gran gran gran	WIGH - 25 E.
8321 TARA DR. NEW PORT RICHEY FL 34654		8321 TARA DR. NEW PORT RICHEY FL 34654		DO NOT WRITE	IN THIS SPACE		
					3. Date Incorporated or Qualified		
					03/02/1988		
	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2873255		ot Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee	5 Additional Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23	T 0	28	T 0-		Trust Fund Contribution		ed to Fees
Zip "	Country	Zip		untry	8. This corporation owes or has pai		
24	9. Name and Address of Currer	29	30	,	Personal Property Tax due June 10. Name and Address of New Reg		□ No
144	_ 	u magisterato Manu		81 Name	IV. Hame alle Address of 1894 fiet	hatelen våent	
	LER, DONNA M.			Trains			
	1 TARA DRIVE			62 Street Add	ress (P.O. Box Number is Not Acceptable	e)	
NE	N PORT RICHEY 34654			83			
				[]			ı
				84 City		FL 85 Z	Zip Code
agent. I ar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig	ations of, Section 607.0505,	Florida Sta	tutes.	tion's board of directors. I hereby accep	t the appointment	as registered
12.		D DIRECTORS	13.	d Agent signature requ	ADDITIONS/CHANGES TO OFFIC		ODC IN 12
TITLE	P	DELETE	1.1 1	TI F	ADDITIONS/CHANGES TO OFFIC	Chang	
NAME	MILLER. KENNETH E.	otter.c	1.2 N)		والهاان ك	, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	9321 TARA DRIVE			TREET ADDRESS			
CITY-ST-ZIP	NEW PORT RICKEY FL		1	ITY-ST-ZIP			
TITLE	VST	☐ DELETE	2.1 1			Chang	ge Addition
NAME	MILLER, DONNA M.		2.2 N				, —
STREET ADDRESS	9321 TARA DRIVE		- 1	TREET ADDRESS			
CITY-ST-ZIP	NEW PORT RICHEY FL			CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 T			Chang	ge Addition
NAME			3.2 N	AME			
STREET ADDRESS			3.3 S	TREET ADDRESS			·
CITY-ST-ZIP			3.4. 0	CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 17	TLE		Chang	ge Addition
NAME			4.21	IAME			
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CITY-ST-ZIP			4.4 0	ITY-ST-ZIP			
TITLE		□ DELETE	5.1 T	TLE		Chang	ge Addition
NAME			5.2 N		*		ļ
STREET ADDRESS			i i	TREET ADDRESS	•		
CITY-ST-ZIP		F 55,555		ITY-ST-ZIP			
TITLE		[_] DELETÉ	61 T			Chang	ge Addition
NAME			6.2 N				
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP	and was the later to	SEALS A RELIANCE AND THE SEALS		ITY-ST-ZIP	Cooking 440 07/03/0 Florida State 1	Contract Contract of the Contr	the inferretion
indicated of officer or o	on this annual report or supplementa	al annual report is true and a eiver or trustee empowered t	ccurate an	d that my signatu	i Section 119.07(3)(i), Florida Statutes. I f ire shall have the same legal effect as if juired by Chapter 607, Florida Statutes; a	made under oath;	that I am an