6/20/2002-90058-0

## FILED Jul 07, 2002 8:00 am Secretary of State

06-20-2002 90058 002 \*\*\*158.75 07-07-2002 90065 003 \*\*\*391.25

## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR):

DOCUMENT # 20000055294 Miles of Smills, Linc. V

| Applied For South Daytona, FL. Son Span Span Potential, FL. Son Span Span Span Span Span Span Span Spa  | incloal Place of Business  A KUC CANAL Rd.  3. Mailing Address,  712 RUO CANAL Rd.  Suite, Apt. #, etc.  |   |  | B0127147<br>DO NOT WRITE IN THIS SPACE |   |              |
|---|--|---|--|--|---|--------------|
| NAME OF CONTROLLY  IN THIS SPACE  TO SOUTH DAUTON FL 30 Code  The above named entity submits this statement for the purpose of changing its registered office or registered agent, orbalin, in the State of Florida.  ACTURE  The above named entity submits this statement for the purpose of changing its registered office or registered agent, orbalin, in the State of Florida.  ACTURE  This corporation is eligible to satisfy its Intangable  Acture May 1, Fee 1s \$150.00  After May 1, | Zio Obuntry  | ZPO LLO U CO  | Jusia l                                      |  | Not Applicable \$8.75 Additional Fee Required | le .         |
| Sometime, typed in primore have of registeries apput and the # applicable. (NOTE: Represed Agent Eground registeries)  In a composition is eligible to satisty, its Intangoble After May 1, Fee is \$150.00  After May 1, Fee is \$550.00  After May 1, Fee is \$550.00  Amended UBR is \$61.25  Maske Check Payable to Department of State  OFFICERS AND DIRECTORS  TITLE  ADDRESS   CONTOLLY   MAME   STREET ADDRESS    TITLE ALUG COLOR   COLOR   COLOR    TITLE ALUG COLOR   COLOR   COLOR    ADDRESS   COLOR   COLOR   COLOR    TITLE ALUG COLOR   COLOR   COLOR    TITLE ALUG COLOR    TITLE  | IN THIS SPA  | CE  | Signet Address P.C.                          | ne D. Connou<br>184 Cannou<br>Dautona  | しょ<br>とさ、<br>FL 学会賞 9                         |              |
| PRICE TO CONDULY ADDRESS THE RED CANAL RD. THE RED CANAL RD. THE RED CANAL RD. THE PUSICION THE NAME ADDRESS THE RED CANAL RD. THE NAME SHET ADDRESS THE RED CANAL RD. THE NAME SHET ADDRESS THE RED CANAL RD. THE NAME THE NAME THE NAME THE NAME  | Signature, typed or printed name of registered agent and this corporation is eligible to satisfy its Intangible ax filing requirement and elects to do so. Ge criteria on back)  | January 1 - May 1<br>After May 1, Fee<br>Amended UBR<br>Make Check Payable to I | Fee is \$150.00<br>is \$550.00<br>is \$61.25 | 10. Election Campaign Financ           | ing\$5.00 May Be                              |              |
| ADDRESS TIE REID CONCE ROL TITLE S. DOUTTON O, FI. 32.119  DO NOT WRITE  THE DOUTE SLOW ROL THE SLOW ROL THE DOUTE SLOW ROL THE DOUTE SLOW ROL THE SLOW ROL THE SLOW ROL THE DOUTE SLOW ROL THE DOUTE SLOW ROL THE NAME STRET ADDRESS CITY-ST-ZIP TITLE NAME  TITLE NAME  TITLE NAME   | President<br>Jayme O. Connol<br>112 kerd Canal Ro<br>5. Daytong, Fl. 3   | 19 M<br>1. ST<br>2.19 C   | ME<br>REET ADDRESS<br>IY-ST-ZIP              | •                                      |   | 0348 (12/01) |
| ADDRESS TIS RECALCALERO STREET ADDRESS ON STREET  | christine slaly  ADDRESS  TIA REID CONOCE R  S. DOUTONG FI. 3  SICIETONIA  SICIETONIA  SICIETONIA  CONTROLLO  CONTROLLO |   | ME<br>REET ADDRESS<br>Y-ST-ZIP               |  | :   | CRZE         |
| DORESS TIA PLOCICULATE Rd. STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME  TITLE  NAME  | ADDRESS TIS RECO COLOL<br>5 DOLLTONO, FI. 33   |   | HEET ADORESS<br>Y- \$T- ZIP                  |  |   |              |
| ADDRESS STREET ADDRESS C-ZIP TITLE NAME   | MORESS TIA REED COMAS RI   | d. STR  | EET ADORESS<br>(-S1-ZIP                      | IN I I I I ST                          | ACE   | :            |
| NAME .  | <b></b> !  | STRI  | EET ADDRESS<br>'-ST-ZIP                      |  |   | 46           |
| ereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I turther certify that the information its 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 the corporation of the receiver or trustee amongwhere to execute this report as required the Chapter 607 Elocitic 607 Elocitic 1997.   | ZIP •  | HAMI<br>Stre<br>Criv  | E<br>ET ADDRESS<br>- ST- ZIP                 | 110 07/2V) Flacin 2                    |   | # 1          |