

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000046446

Entity Name: THE MILE HI GROUP, INC.

FILED
Oct 05, 2009
Secretary of State**Current Principal Place of Business:**12515 ORANGE DRIVE
805
DAVIE, FL 33330**New Principal Place of Business:****Current Mailing Address:**12515 ORANGE DRIVE
805
DAVIE, FL 33330**New Mailing Address:**

FEI Number: 03-0439503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:HEPBURN, HAROLD
18455 MIRAMAR PARKWY
MIRAMAR, FL 33029 US**Name and Address of New Registered Agent:**HEPBURN, HAROLD
18455 MIRAMAR PARKWY
120
MIRAMAR, FL 33029 US

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.

SIGNATURE: HAH

10/05/2009

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**Title: VP () Delete
Name: ANDREA, RAMERO
Address: 12515 ORANGE DRIVE
City-St-Zip: DAVIE, FL 33330Title: P () Delete
Name: NORTON, WALTER
Address: 18455 MIRAMAR PWAY
City-St-Zip: MIRAMAR, FL 33029**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: ANNA, DUNBAR PRES
Address: 18455 MIRAMAR PWAY
City-St-Zip: MIRAMAR, FL 33029Title: VP (X) Change () Addition
Name: NORTON, WALTER
Address: 18455 MIRAMAR PWAY
City-St-Zip: MIRAMAR, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAH

RA

10/05/2009

Electronic Signature of Signing Officer or Director_____
Date