2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 16, 2007 08:00 A Secretary of State

ANNUAL REPURT				Secretary of S			C.
DOCU	MENT # P020001176			2	Secretary of	31	
1. Entity Nam	ne						
MILLER	& JOHNSON INC.						
			No. TEST				
1 1	e of Business	Mailing Address					
1448 NW 31 Miami, Fl. 3		8890 SW 97TH TERR Miami, Fl. 33176					
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	A NOT WOITE	IN THIS ODA	^	04102007	No Chg-P	CR2E034 (11/05)	
L	O NOT WRITE	IN THIS SPA	CE	4. FEI Numb		Applied Fo	
				74-306		Not Applica	able
	<u> </u>		·	5. Certificate	of Status Desired	Fee Required	
	6. Name and Address of Current Re	gistered Agent					:
PEREZ, A	LFREDO		· · · · · · · · · · · · · · · · · · ·	DΩ	NOT W	PITE	٠,
8890 SW 9							٠,
I WILDIWII, F.C.	33170			IN	THIS SP	ACE	٠.
	named entity submits this statement for t	he purpose of changing its registe	red office or register	ed agent, or bo	th, in the State of Flo	orida. I am familiar with, and acc	ept
the obliga	tions of registered agent.						
SIGNATURE.	Signature typed or printed name of registered agent and	(NOTE Pageta)	ed Agent signature required	(when remetable)		DATE	
	Gignation (\$2500 or principal lights or registered agont and	Talle is applicable. [11012. Togate.	ad rigorii signittore requires			DOVE.	
	E NOW!!! FEE IS \$150.00	9. Election Campaign Fina Trust Fund Contribution		.00 May Be ed to Fees			
	ay 1, 2007 Fee will be \$550.00	<u></u>				······································	
10.	OFFICERS AND D	RECTORS	_ :	· · · ·	. : :, .		3 :
NAME	, - ,		* * * * * * * * * * * * * * * * * * * *				
	VASALLO, FRANCISCO						
STREET ADDRESS	9214 S.W. 9 TERRACE						:::
CITY-ST-ZIP	9214 S.W. 9 TERRACE MIAMI, FL 33174						
l '	9214 S.W. 9 TERRACE						
CITY-ST-ZIP TITLE NAME STREET ADDRESS	9214 S.W. 9 TERRACE MIAMI, FL 33174 DS PEREZ, ALFREDO 8890 SW 97 TERR						
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	9214 S.W. 9 TERRACE MIAMI, FL 33174 DS PEREZ, ALFREDO						
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12. I hereby certify that the information supplied with the time coes, for qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is fue 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 employed 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 the rich employered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/67 305 559-485

ALFREDO PEREZ