

2004 FOR PROFIT CORPORATION
REINSTATEMENT

1/2

DOCUMENT # P03000035376

1. Entity Name
C.K. MILLER STUCCO, INC.



Principal Place of Business
4677 VERGARA COURT
ORLANDO, FL 32811

Mailing Address
4677 VERGARA COURT
ORLANDO, FL 32811

2. Principal Place of Business

4677 VERGARA CT.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO FL

City & State

Zip

32811

Country

U.S.A.

Zip

Country

10252004 REIN-P CR2E098 (6/04)

4. FEI Number
56-2417766

Applied For
Not Applicable

5. Certificate of Status Desired
□ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, C.K.
4677 VERGARA COURT
ORLANDO, FL 32811

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

X C.K. Miller or Cecil Miller

10-25-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2005, Fee will be \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, C.K.		NAME	
STREET ADDRESS	4677 VERGARA COURT		STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL 32811		CITY-ST-ZIP	
<input type="checkbox"/> Title		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
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NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
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NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
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NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X C.K. Miller or Cecil Miller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-25-04

11/26/04

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CK Miller Stucco Inc
4677 Vergara Ct
Orlando, FL 32811

Oct. 25, 2004

Division of Corporations
P O Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I hereby give notice that I did not receive a renewal notice for the above ~~stated~~ stated corporation. I did not know that a renewal was to be filed, until I was told that ~~the~~ corporation has been dissolved.

Sincerely,



Cecil Miller
President