

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2008 8:00 am
Secretary of State

07-10-2008 90013 040 ***150.00

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07072008 Chg-P CR2E034 (12/06)

DOCUMENT # P04000032969 1. Entity Name MILLER MECHANICAL REPAIR, INC.					
Principal Place of Business 2552 COLUMBUS STREET FORT MYERS, FL 33901			Mailing Address 2552 COLUMBUS STREET FORT MYERS, FL 33901		
2. Principal Place of Business - No P.O. Box # 2771 HANSON ST		3. Mailing Address PO BOX 9209			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State FORT MYERS, FL		City & State FORT MYERS, FL		4. FEI Number 51-0497234	
Zip 33901		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MILLER, JOSEPH E JR. 2552 COLUMBUS STREET FORT MYERS, FL 33901			7. Name and Address of New Registered Agent Name MILLER, Joseph E JR. Street Address (P.O. Box Number is Not Acceptable) 40900 HORSE SHOE RD City PUNTA GORDA FL Zip Code 33982		
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 <i>Joseph E Miller Jr</i> DATE 7-7-08 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MILLER, JOSEPH E JR. 2552 COLUMBUS STREET FORT MYERS, FL 33901	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MILLER JOSEPH E JR 40900 HORSE SHOE RD PUNTA GORDA FL 33982
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Joseph E Miller Jr</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 7-7-08 Daytime Phone # 239-633-8282		