2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000161794

City-St-Zip:

ARCADIA, FL 34269

FILED Oct 08, 2005 Secretary of State

Entity Na	me: ERIC MIL	.ES, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
7875 SW OSGOOD ROAD ARCADIA, FL 34269			4127 JAMES STREET PORT CHARLOTTE, F	4127 JAMES STREET PORT CHARLOTTE, FL 33980	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
7875 SW OSGOOD ROAD ARCADIA, FL 34269			4127 JAMES STREET PORT CHARLOTTE, FL 33980		
FEI Number	: 20-1945090	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ARCADIA, The above in the State	OSGOOD RO/ , FL 34269 e named entity e of Florida. RE: WILLIAM	US submits this statement for the E. MILES	purpose of changing its registered		
	Electro	nic Signature of Registered Ag	gent	Date	
		3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (MILES, WILLIA 7875 SW OSG ARCADIA, FL	OOD ROAD	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	SEC (MILES, WILLIA 7875 SW OSG ARCADIA, FL	OOD ROAD	Title: (Name: Address: City-St-Zip:)Change ()Addition	
Title: Name: Address:	TRES (MILES, WILLIA 7875 SW OSG		Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: WILLIAM E. MILES **PRES** 10/08/2005