2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P05000066793

Entity Name: MILLER STREET PROPERTIES INC

Current Principal Place of Business:

10415 MANASSAS CIR
ORLANDO, FL 32821

New Principal Place of Business:

PO BOX 691565
ORLANDO, FL 32869

Current Mailing Address:

10415 MANASSAS CIR
ORLANDO, FL 32821

New Mailing Address:

PO BOX 691565
ORLANDO, FL 32869

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHORIAK, THOMAS M
10415 MANASSAS CIR
ORLANDO, FL 32821 US

Name and Address of New Registered Agent:

SHORIAK, THOMAS M
PO BOX 691565
ORLANDO, FL 32869 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: 05/01/2006
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SHORIAK, THOMAS M
Address: 10415 MANASSAS CIR
City-St-Zip: ORLANDO, FL 32821

Title: V ( ) Delete
Name: DELUDE, JUSTIN M
Address: 10311 LICORICE WAY
City-St-Zip: ORLANDO, FL 32821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SHORIAK, THOMAS M
Address: PO BOX 691565
City-St-Zip: ORLANDO, FL 32869

Title: V (X) Change ( ) Addition
Name: DELUDE, JUSTIN M
Address: PO BOX 691565
City-St-Zip: ORLANDO, FL 32869

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS M SHORIAK P 05/01/2006
Electronic Signature of Signing Officer or Director — Date