FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P9300005709 (9)

FILED Mar 05 1998 8:00am Secretary of State

| MILES DEVELOPMENT CO., INC. | | | | | A TRANSPORT THE MATER THAN BRIDE BOWN BOWN BOWN BRIDE | | APAG 1811 1848 | |
|---|--|---|------------------|-------------------|---|--|----------------------------|-----------------------------|
| | | | | | | | | |
| Principal Place of Business Mailing Address | | | | | | i saatidai isa tasaa sifii aasii aasii aasii aasii aasi | | 1999 1591 |
| 10255-B GENERAL DRIVE 10255-B GENERAL DRIVE | | | | | | | | |
| ORLANDO FL 32824 ORLANDO FL 32824 | | | • | | | DO NOT WRITE IN THIS S | PACE | |
| U\$ US | | | | | | 3. Date Incorporated or Qualified | 77.00 | |
| | | | | | | 01/12/1993 | | 1 |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | - Ar | oplied For |
| 21 | | 26 | | | | 59-3160484 | | ot Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, | | | | | | | | Additional |
| 27 | | | | | | 5. Certificate of Status Desired | Fee Ro | equired |
| City & Stat | e | City & State | | | | 6. Election Campaign Financing | \$5.00 | May Be |
| 23 | | 28 | 3 | | | Trust Fund Contribution | | to Fees |
| Zip | Country | Zip | Coi | intry | , | 8. This corporation owes or has paid the curr | | |
| 24 | 25 | 29 | 30 | | | 10.001.01.001.0 | | No |
| | 9. Name and Address of Cur | rent Registered Agent | | 241 . | | 10. Name and Address of New Registered A | gent | |
| M | iles, ian eso | | | 81 1 | Name | | | 1 |
| 10255-B GENERAL DRIVE | | | | 82 5 | Street Addres | ress (P.O. Box Number is Not Acceptable) | | |
| 01 | RLANDO FL 32824 | | | | | | | |
| | | | | 83 | | | | |
| | | | | 84 (| City | | 85 Zip | Code |
| | | | | | | <u> </u> | <u> </u> | |
| 11. Pursuant | to the provisions of Sections 607.0 |)502 and 607.1508, Florida S ate of Florida, Such change s | tatutes, the a | bove-n d hv th | named corpoi ne corporatio | ration submits this statement for the purpose of n's board of directors. I hereby accept the appo | changing il sintment as | ts registered registered |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE | | | | | | | | |
| | Signature, typed or printed name of registered | | (NOTE Registere | d Agent s | signature required | when reinsteling) DATE ADDITIONS/CHANGES TO OFFICERS AND | DIRECTOR | 20 IN 12 |
| 12. TITLE | PST | AND DIRECTORS DELETE | | TLE | | ADDITIONS/CHANGES TO OFFICE TO AND | Change | Addition |
| | MILES, IAN | veren | 1.2 N | | | | | |
| NAME OFFICE ADDRESS | 10255-B GENERAL DRIVE | | | treet adi | INDECC | | | [3 |
| STREET ADDRESS | ORLANDO FL 32824 | | | ITY-ST-Z | | | | 13 |
| CITY-ST-ZIP TITLE | ONDARDO TE SESEY | DELETE | | | LW | | Сһалде | Addition |
| NAME | | | | AME | | *, | | ļ |
| STREET ADDRESS | | | | TREET ADI | IDRESS | • | | İ |
| CITY-ST-ZIP | | | | HTY-ST- | | $\chi_{ij} = \chi_{ij} + \chi_{ij}$ | | ŀ |
| TITLE | | DELETE | | 3.1 TOTLE | | | Change | ☐ Addition |
| NAME | | | 3.2 N | AME | | | | |
| STREET ADDRESS | | | 3.3 S | TREET ADI | idress | | | 1 |
| CITY-ST-ZIP | | | 3.4.0 | HY-ST- | ZIP | | | İ |
| TITLE | | ☐ DELETE | | | | | Change | ☐ Addition |
| NAME | | | 4. 2 N | AME | | | | ļ |
| STREET ADDRESS | | | 4.3 S | TREET ADI | DRESS | | | |
| CITY-ST-ZIP | | | 4.4 C | ITY-ST-Z | ZIP | | | |
| TITLE | | DELETE | 5.1 To | TLE | 1 | | Change | ☐ Addition |
| NAME | | | 5.2 N | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 S | TREET ADI | idress | | | |
| CITY-ST-ZIP | | | 5.4 C | IFY-ST-Z | ZIP | | | |
| TITLE | | DELETE | 6.1 T | TLE | | | ☐ Change | ☐ Addition |
| NAME | | | 6.2 N | AME | | | | |
| STREET ADDRESS | | | 6.3 S | TREET ADI | DRESS | | | |
| CITY-ST-ZIP | <u> </u> | | | ITY-ST-Z | | | | |
| 14. I hereby | certify that the information supplied | with this filing does not que | lify for the ex- | emptio | n stated in S | ection 119.07(3)(i), Florida Statutes. I further cer | tify that the | information |

for trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ent with an address. officer or director of the corporation or the Block 12 or Block 13 if changed, or on an