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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1996 DIVISION OF CORPORATIONS

DOCUMENT #

T# P93000048280 (0)

MILLER	<b>ENTERPRISES</b>	OF	BOCA	raton,	INC.
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Mailing Address Principal Place of Business 2333 WEST SILVER PALM ROAD 2901 CLINT MOORE RD **BOCA RATON FL 33432** UNIT 4 **BOCA RATON FL 33496** 3a. Date of Last Report 3. Date Incorporated or Qualified 03/28/1995 07/02/1993 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0425080 Not Applicable 26 21 \$8.75 Additional Suite Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zio Country Ζıρ Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) MILLER, KIRK G 82 2901 CLINT MOORE RD 83 UNIT 4 Zip Code **BOCA RATON FL 33496** 85 84 City 11. Pursuant to the provisions of Sections 607.05.02 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the appointment of Spoton 607.0505, Florida Statutes. 3-12-96 SIGNATURE MOTE Forgote in dispersion of the Lare ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change ☐ Addition DELETE 1 1 T-TLE TITLE 1.2 NAME NAME MILLER, KIRK G 1.3 STREET ADDRESS 242 SW 5 ST STREET ADORESS 1.4 CITY - ST - ZIP **BOCA RATON FL** CITY-ST-ZIP ☐ Change Add-tion DELETE 2.1 1011 **VP** TITLE 2.2 NAME MILLER, JACKIE L NAME 2.3 STREET ADDRESS 242 SW 5 ST STREET ADDRESS 2.4 CHY-ST-ZIP **BOCA RATON FL** CITY-ST-ZIP Change ☐ Add-tion DELETE 3 1 THILE TITLE MILLER, EMILY A NAME 3.3 STREET ADDRESS 2333 W SILVER PALM RD STREET ADDRESS **BOCA RATON FL** 3.4 CITY - ST - ZIP CITY - ST - ZIP [ ] Change ■ Addition DELETE 4 1 TIFLE TITLE ST 4.2 NAME MILLER, JOHN G NAME 4.3 STREET ADDRESS 2333 W SILVER PALM RD STREET ADDRESS 4.4 CITY ST-7/P **BOCA RATON FL** CITY - ST - ZIP Change Addition DELETE 5 1 THILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 546 TY-ST-7P CITY - S? - ZiP Change Addition DELETE 6 1 HILE THLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is volunitarily furnished and does not qualify for the exemption stated in Section 119.07(3(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under coath, that I am an officer or director of this 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 12 or Block 13 if changed on an attachment with a payees. 6.4 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.12.96

407-994-9272

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CR2E034 (12/95)