Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90167 045 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000062103

1. Corporation Name

MILLER-BASKIN CORPORATION

Principal Place	e of Business	Mailing Address		1 1001/60) (10 16160 (11) 201/1 201/1 201/1 201/1 201/1 201/1 201/1 201/1 201/1 201/1 201/1 201/1 201/1 201/1
2111 BALMAIN WAY		2111 BALMAIN WAY		
GLENDALE CA 91206		GLENDALE CA 91206		DO NOT WRITE IN THIS SPACE
US		US		3. Date Incorporated or Qualifed
				08/31/1993
2. Principal Pl	lace of Business	2a. Mailing Address		4. FE! Number Applied For
21 700 HERMOSA ST.		26 700 HERMOSA ST.		58-2073993 Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	<u> </u>	5 Contiferts of Status Pagined \$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
	PASADENA, CA	28 SOUTH PASADE		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countrý	8. This corporation owes the current year Intangible Personal Property Tax.
24 910	30 25 USA	29 9 10 30 30	USA	Personal Property Tax. LI Yes No.
9. Name and Address of Current Registered Agent 81 Name				
MILLER, SAMUEL				
2724 N. GARDEN DR.			82 Street	et Address (P.O. Box Number is Not Acceptable)
#302		,	83	
LAKE	E WORTH FL 33461	•		ar 7in Codo
			84 City	FL 85 Zip Code
SIGNATURE	m familiar with, and accept the obligati Signature, typed or pinted name of registered agent OFFICERS AND	and title if applicable. (NOTE: Re		re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PT OFFICERS AND	DELETE	1.1 TITLE	P Change Addition
NAME	MILLER, ALLAN L	<u></u>	1.2 NAME	MILLER, ALLAN L
STREET ADDRESS	2111 BALMAIN WAY		1.3 STREET ADDRESS	I make the control of
CITY-ST-ZIP	GLENDALE CA		1.4 CITY-ST-ZIP	SOUTH PASADENA, CA 91030
TITLE	VPS	☐ DELETE	2.1 TITLE	V·P € Change
NAME	BASKIN, HARRIET M		2.2 NAME	BASKIN, HARRIET M
STREET ADDRESS	825 BRIGHTON AVE		2.3 STREET ADDRESS	1
CITY-ST-ZIP	READING PA		2.4 CITY-ST-ZIP	WYOMISSING, PA 19610
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	es [
CITY-ST-ZIP			3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE	[Cliarge Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	200
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME !			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	ss
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME	1		6.2 NAME	}

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP