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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000067421

1. Corporation Name

1110111111	D G. MILLER & ASSOCIA	TEO, HVC	la							
Principal Place	e of Business	Ma	ling Address				4 10011004 H4 40100 H1H 40111 H	18411 20 11; 00119	#11:11 #4 1) 616 1	
9152 SW 23RD STREET 9152C SW 23RD ST										
SUITE C FT LAUDERDALE FL 33324				4			DO NOT WE	ITE IN THIS	CDACE	
FORT LAUDERDALE FL 33324 US						-	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
08						"	09/22/1993			
2 Principal D	Place of Business	2a	Mailing Address			4	, FEI Number		TA	pplied For
	lace of business	26	(vidining) ladi 000				65-0446312		h	ot Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.	_						Additional
22	<i>π</i> , οιο.	27				5	. Certifcate of Status Desired			equired
City & Stat	te		City & State			6	. Election Campaign Financing		\$5.00	May Be
23		28	ŕ				Trust Fund Contribution	' -		to Fees
Zip	Country		Zip	Cou	itry	8	. This corporation owes the cu	rrent year In	tangible	
24	25	29		30			Personal Property Tax.		Yes	□No
	9. Name and Address of Cur	rent Regist	ered Agent			10). Name and Address of New	Registered	Agent	
					81 Name					
	ER, RICHARD G				82 Street A	Address (P.O. Box Number is Not Accep	table)		
	2C SW 23RD STREET			·						
FTL	AUDERDALE FL 33324				83					
					84 City				85 Zip	Code
								<u>FL</u>	- `	}
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida	a. Such change was	authorized	by the corpo	corporation's b	on submits this statement for the board of directors. I hereby according	e purpose of ept the appo	r changing it intment as r	s registered egistered
SIGNATURE						outred when	rejectation)	DATE		
	Signature, typed or printed name of registered		applicable. (NOT	E [·] Registered	gent signature re	quired when		DATE FFICERS AI	ND DIRECT	ORS IN 12
12.	OFFICERS	agent and title if	applicable. (NOT		gent signature re	quired when	reinstating) ADDITIONS/CHANGES TO O		ND DIRECT	ORS IN 12
12.	OFFICERS DP		applicable. (NOT	E: Registered 13.	gent signature re	quired when				
12. TITLE NAME	OFFICERS DP MILLER, RICHARD G		applicable. (NOT	E: Registered 13.	gent signature re	quired when				
12. TITLE NAME STREET ADDRESS	OFFICERS DP MILLER, RICHARD G 9152C SW 23RD STREET		applicable. (NOT	E: Registered 13. 1.1 TIT 12 NA 13 ST	egent signature rec E //E //EET ADDRESS	nedw beniup				
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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 attackment withan address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

RICHARO G. MILLER