FILED 2001 UNIFORM BUSINESS REPORT (UBR) Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P93000067421 RICHARD G. MILLER & ASSOCIATES, INC. 04-26-2001 90041 006 ***150.00 Principal Place of Business Mailing Address 1031 LINCOLN STREET 1031 LINCOLN STREET HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 644945 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0446312 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MILLER, RICHARD G Street Address (P.O. Box Number is Not Acceptable) 1031 LINCOLN STREET HOLLYWOOD FL 33019 City Zip Code 8. 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ■ Addition TITLE DP De!ete TITLE Change NAME NAME MILLER, RICHARD G 1031 LINCOLN STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP HOLLYWOOD FL 33019 ☐ Delete TITLE ☐ Change Addition: TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIF ☐ Change Addition ☐ Deiete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAMS STREET ADORESS STREET ADDRESS City-St-ZP CITY-ST-ZIP Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attact man address, with all other than the proposers.

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954-924-8494

Daytime Phone #

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