

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000007620

1. Entity Name

MILLER GLASS & GLAZING, INC.

FILED
Mar 30, 2000 8:00 am
Secretary of State

03-30-2000 90028 032 ***150.00

Principal Place of Business

3601 N DIXIE HWY
BAY 20
BOCA RATON FL 33431

Mailing Address

3601 N DIXIE HWY
BAY 20
BOCA RATON FL 33431-5903

2. Principal Place of Business

601 N.E. 28th CT.

3. Mailing Address

601 N.E. 28th CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pompano Beach, FL Pompano Beach, FL

Zip

33064

Country

USA

Zip

33064

Country

USA

4. FEI Number

65-0465014

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILLER, SIDNEY S
3601 N. DIXIE HWY BAY 20
BAY 2
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name
Miller, Sidney S.

Street Address (P.O. Box Number is Not Acceptable)

601 N.E. 28th COURT

City

Pompano Beach

FL

Zip Code

33064

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
MILLER, SIDNEY S
3601 N. DIXIE HWY - BAY 20
BOCA RATON FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Miller, Sidney S
601 N.E. 28th COURT
Pompano Beach, FL 33064

☒ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-23-00

Date

954-784-6601

Daytime Phone #

CR2E034 (9/99)