## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR RICHARD J. MILLER, PRESIDENT

## May 04, 2001 8:00 am Secretary of State **DOCUMENT** # P96000015760 1. Entity Name 05-04-2001 90167 030 \*\*\*150.00 RICHARD J. MILLER, P.A. Principal Place of Business Mailing Address 250 Royal Palm Way 250 Roval Palm Way AAAAA## Suite 300 Suite 300 Palm Beach FL 33480 Palm Beach FL 33480 2. Principal Place of Business 3. Mailing Address c/o Edwards & Angell, LLP c/o Edwards & Angell, LLP Suite, Apt. #, etc. Suite 400 Suite, Apt. #, etc. Suite 400 DO NOT WRITE IN THIS SPACE One North Clematis Street One North Clematis Street City & State City & State 4. FEI Number Applied For West Palm Beach FL West Palm Beach FL 65-0643705 Not Applicable Country \$8.75 Additional 33401 **USA** 33401 USA 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Angell Corporate Services, Inc. Angell Corporate Services, Street Address (P.O. Box Number is Not Acceptable) One North Clematis Street 250 Royal Palm Way, Suite 300 Palm Beach FL 33480 Suite 400 City Zip Code 33401 West Palm Beach 8. The above named e ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida, ANG <del>VICES. IN</del>C. 4/23/2001 SIGNATURE rore President (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE 18 \$150.00 9. This corporation is ligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPST TITLE ☐ Delete Change mn F CR2E034 (11/00 Addition NAME Miller, Richard J. NAME Miller, Richard J. STREET ADDRESS 250 Royal Palm Way, Suite 300 STREET ADORESS One North Clematis Street, Suite 400 CITY-ST-ZIP CITY-ST-ZIP Palm Beach FL 33480 West Palm Beach FL TITLE Delete TIDE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CMY-ST-ZIP 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 anjaddress, with all other like egypowered.

4/23/2001

561-833-7700