

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 02, 2002 8:00 am
Secretary of State

05-06-2002 90176 045 ***150.00

DOCUMENT # P96000049348

1. Entity Name

MILLER & ASSOCIATES TRADING EXPORT CO.,

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11621 SW 10TH COURT

Suite, Apt. #, etc.

3. Mailing Address

11621 SW 10TH COURT

Suite, Apt. #, etc.

City & State

PEMBROKE PINES, FLORIDA

Zip

33025

Country

City & State

PEMBROKE PINES, FL

Zip

33025

Country

4. FEI Number

65-0673232

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **ASTON MILLER**

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

11621 SW 10TH COURT

11621 SW 10TH COURT

City **PEMBROKE PINES**

FL

Zip Code
33025

**DO NOT WRITE
IN THIS SPACE**

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

Aston Miller **ASTON MILLER, Director**

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

(NOTE: Registered Agent signature required when reinstating)

5-22-02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.

(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **PD**
NAME **ASTON G. MILLER**
STREET ADDRESS **11621 SW 10TH COURT**
CITY-ST-ZIP **PEMBROKE PINES, FL 33025**

TITLE **T**
NAME **CHERYL LYEW**
STREET ADDRESS **11621 SW 10TH COURT**
CITY-ST-ZIP **PEMBROKE PINES, FL 33025**

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Aston G. Miller

ASTON G. MILLER, President,

Date

4-15-02

Daytime Phone #

CR2E034B (12/01)