FILED 2008 FOR PROFIT CORPORATION Apr 04, 2008 08:00 Al Secretary of State **ANNUAL REPORT** DOCUMENT # P96000094663 MILLER TYME OF ISLAMORADA, INC. Principal Place of Business Mailing Address 134 PUEBLO STREET 134 PUEBLO ST TAVERNIER, FL 33070 TAVERNIER, FL 33070 No Chg-P CR2E034 (11/05) 03272008 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0708321 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MIKLAS, JOE DO NOT WRITE 88765 OVERSEAS HIGHWAY TAVERNIER, FL 33070 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. I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS

10. OFFICERS AND DIRECTORS

TITLE PSD
MAME MILLER, GLEN W
STREET ADDRESS
CITY-S1-ZIP TAVERNIER, FL 33070

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000880197 04/15/08-80048-008 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like ampowered.

SIGNATURE:

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP

CITY-ST-ZIP

Alen Miller

Glen Miller

4-1-08.305-852-2011

Daytime Phone #