FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700086669 (3)

FILED Jun 01 1998 8:00am Secretary of State

MILLER	R-FOX PROPERTIES, INC.					
Principal Plac	e of Business	Mailing Address				T TEORISON CIL IRINI ARBIA BRINI AQUE BRUN BRUS IBINÒ DINIO DINIO DINIO 1811 1891
GLADES BUIL	ve c enter west Loing. Suite 303 Urg Fl 33702	GLADES BUILDING	977 EXECUTIVE CENTER WEST GLADES BUILDING. SUITE 303 ST PETERSBURG FL 33702			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
						10/07/1997
<u> </u>	Place of Business	2a. Mailing Addres	s			4. FEI Number Applied For
21		26				APPLIES FOR Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, et	ic.			5. Certificate of Status Desired See Required
City & State	c	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	7 _(p)	Cou	intry	,	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due Juno 30. 🔲 Yes 🔣 No
	g, Name and Address of Cur	rent Registered Agent				10. Name and Address of New Registered Agent
	ISCARA, ERNEST L			81	Name)
877 EXECUTIVE CENTER WEST				82	Street A	t Address (P.O. Box Number is Not Acceptable)
	ADES BUILDING, SUITE 303			83		
81	PETERSBURG FL 33702					
				84	City	FL 85 Zip Code
office or r agent. I a SIGNATURE	to the provisions of screening for the Start familiar with, and accept the ob- Signature type for print draine of regions.					d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
12.		ND DIRECTORS	INUTE: Registere	a Age	nt signature	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELE		ULE		PRESOPERT, SECRETARY Change HAddition
NAME	MASCARA, ERNEST L		1.2 N	AME		1 Respect, stokeshof
STREET ADDRESS	877 EXECUTIVE CENTER V		1.3 \$	TREET	ADORESS	
CITY-ST-ZIP	ST PETERSBURG FL 33702				1- <u>2</u> IP	
THILE		[]] DELE				Change Addition
NAME			2.2 N		i i	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELE			ST-ZIP	Change Addition
NAME		<u> </u>	3.1 II		1	C cusule
STREET ADDRESS			I '		ADDRESS	}
CITY-ST-ZIP			1		31 - ZIP	
TITLE		DELE				Change Addition
NAME			4. 2 N	IAME	1	
STREET ADDRESS			4.3 S	!REET	ADDRESS	
CITY-ST-ZIP			4.4.0	ITY-S	1 - ZIP	
TITLE		☐ DELE	TE 5.1 T/	TLE	Ī	☐ Change ☐ Addilion
NAME			5.2 N]	500002544545
STREET ADDRESS			5.3 S	IREE1	ADDRESS	-06/02/9801031045
CITY-ST-ZIP			5.4 CI		1 - ZIP	***5850_00 /
TITLE		☐ DEFE.			{	Change Addition
NAME			62 N			
STREET ADDRESS			•		ADDRESS	11/2
CITY-ST-ZIP			6.4 CI			ted in Section 119.07(3)(i). Florida Statutes. I firster certify that the information

4. Thereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is required annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an approximent with an address.

01011471107

4-28-98

815-579-1200