| D URDS CL LOT 192 P.O. ROX 19852 JUSS STATULE FL 32210 DO NOT WRITE IN THIS SPACE D UND WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE Status 28 Suite, Appl. #, wic: 28 Suite, Appl. #, wic: 29 Suite, Appl. #, wic: 20 Suite, Appl. #, wic: 21 City & State 00 NOT WRITE IN THIS SPACE DO NOT WRITE IN THIS SPACE Sector Causified Suite, Appl. #, wic: 27 City & State 00 NOT WRITE IN THIS SPACE Zop 30 Suite, Appl. #, wic: 20 Zop Country B Name and Address of Current Registered Agent 10. Wenn and Address of New Registered Agent MILLER, RANDY L 32 State Interproteion own in the obligation of Address of Floreds. Stuth change was autorized by the colopation's board of directors. Hereby Address of New Registered Agent MILLER, RANDY L 33 State Interproteions of section 607.0502 and 607.1607. Floreds Stutus. He above name corporation's board of directors. Hereby Address of New Registered Agent MULER, RANDY L 33 State Interproteions of section 607.0502 and 607.1607. Floreds Stutus has a seglatered agent, on columptice | ANNUAL REPORT | | | FILED Aug 06, 1999 8:00 an Secretary of State 08-06-1999 90007 012 ***150.00 | |
|---|---|-------------------------------------|--------------------------------------|---|--------------|
| | | 000013547 | | r | |
| Open File Open File <t< th=""><th>A MILLER EXCAVATING, INC.</th><th></th><th>an 7 an</th><th></th><th></th></t<> | A MILLER EXCAVATING, INC. | | an 7 an | | |
| SCONNILE FL 32210 JACKSONNILE FL 322454552 DO NOT WRITE IN THIS SPACE Principal Place of Business 2a. Maling Address 4. FL Buncher 3. Gate Incorported of Qualified GOB State, Act. #. etc. Suite, Act. #. etc. S. Canting and resume 5. Canting and resume< | ncipal Place of Business | Mailing Address | | | |
| Original Place of Business Za. Malling Address Applied For Not Applied Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. etc. Sulle, Apt. F. | 0 103RD ST., LOT 192 KSONVILLE FL 32210 | | 32245-6952 | | |
| Principal Place of Business | | | | | Ì |
| Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 5. Certificate of Status Desired F8.75 Arctional Fee Routed City & State City & State C. Certificate of Status Desired F8.75 Arctional Fee Routed City & State City & State E. Election Campaign Financing \$5.00 Mmg Be Added to Fee Zip 20 Country 8. This economic noves the current Year Added to Fee Is man and Address of Current Registered Agent 10. Name and Address of Aver Registered Agent 11. Name MILLER, RANDY L Street Address (P.O. Box Number is Not Acceptable) 33 JACKSONVILLE FL 32210 21 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 33 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 33 City C FL 85 Zip Code Pursuant to the provisions of sections 607.0502 and 607.1508, Floridal Statutes, the above named corporation subarts of directors. I horeby accept the apportune the adjustment direction 007.0557, Adjustment Ager Spatter mount where mounting Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) OPE FL 11 11 Deleter Street Address (P.O. Box Number is Not Acceptable) Address (P.O. Box Number is | Principal Place of Business | | SS | 4. FEI Number Applied Fo | |
| City & State 21 City & State 25.00 http://www.communication.commu | Suite, Apt. #, etc. | Suite, Apt. #, o | ətc. | 5 Contificate of Status Desired \$8.75 Addition | |
| Zip Zip Country Image/Dia Prevent Property Yes No 30 30 Stress Address of Current Registered Agent 10 Name and Address of Current Registered Agent MILLER, RANDY L 33 Stress Address of New Registered Agent 10 Name and Address of New Registered Agent JACKSONVILLE FL size10 31 Stress Address (P.O. Box Number is Not Acceptable) 4 JACKSONVILLE FL size10 4 City FL 5 Zip Code Pursuant to the provisions of sections 507.0502 and 607.1508, Florida Statutes, the above named concontion submits this statement for the purpose of changing its registered agent, or toch, in the State of Florida, Statutes, the above named concontion submits this statement for the purpose of changing its registered agent, or toch, in the State of Florida, Statutes, the above named concontion submits this statement for the purpose of changing its registered agent, or toch, in the State of Florida, Statutes, the above named concontion submits this statement for the purpose of changing its registered agent, or toch, in the State of Florida, Statutes, the above named concontion submits this statement for the purpose of changing its registered agent, or toch, in the State of Florida, Statutes, the above named concontion submits this statement for the purpose of changing its registered agent, or toch, in the State of Florida, Statutes, the approximation agent and the approximation | City & State | City & State | | 6. Election Campaign Financing \$5.00 May Be | |
| B. Name and Address of Current Registered Agent B. Name and Address of Current Registered Agent B. Name and Address of New Registered B. Na | · | Zip | | 8. This corporation owes the current year | |
| MILLER, RANDY L 9380 103RD ST, LOT 192 JACKSONVILLE FL 32210 94 City | | | 30 | | |
| 9380 103RD ST., LOT 192 12 Street Address (P.O. Box Number is Not Acceptable) 133 134 City FL 85 Zip Code 135 Collogiatrice of agents of adent statutes is the above-named corporation submits this statement for the purpose of charging is registered agent, in the Statutes of adent statutes is corporation submits with statement for the purpose of charging is registered agent, in the Statutes of adent statutes is corporation submits with statement for the purpose of charging is registered agent, in the Statutes of adent statutes is corporation submits with statement for the purpose of charging is registered agent, in the Statutes of adent statutes is corporation submits with statement for the purpose of charging is registered agent, in the Statutes of adent statutes is corporation statement statutes is corporation statement and statement anden agent is addition and statement anden age | | | 81 Name | | |
| | | | 82 Street Add | Iress (P.O. Box Number is Not Acceptable) | |
| Pursuant to the provisione of sections 607 0502 and 607 1508, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. Law familiar with, and accept the obligations of, section 607 0505, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502 and 607 1508, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502 and 607 1508, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. NATURE Deprovement of the provisione of section 607 0502, Florida Statutes. Deprovement of the provisione of section 607 0502, Florida Statutes. Deprovement of the provisione of section 607 0502, Florida Statutes. Deprevent of the provisione of section 607 0502, Florida Statutes. Deprevent of the provisione of section 607 0502, Florida Statutes, and then formation floridation Statutes. Deprevent of the provisione of section 607 0502, Florida Statutes, and then formation Deprevent of the provision of the corporation of the corporatio | | | 83 | | { |
| Pursuant to the provisions of sections 607.0502 and 607.1508. Florida Statutes, the above name d corporation submits this statement for the purpose of change is such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. L and finalitar with, and accept the obligations of, section 607.0505, Florida Statutes, the above name d corporation's board of directors. I hereby accept the above name day of the corporation's board of directors. I hereby accept the above name day of the corporation's board of directors. I hereby accept the above name day of the corporation's board of directors. I hereby accept the appointment as registered agent, can advant and set appletely accept the obligations of section 607.0505, Florida Statutes. NATURE PVST OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVST OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVST OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVST OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVST OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVST OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVST OFFICERS AND DIRECTORS 3380 103RD ST., LOT 192 33TREET ALORESS 3380 103RD ST., LOT 192 34CKSONVILLE FL 32210 24CMNE 33TREET ALORESS 332NEET ALORESS 333NEET ALORESS | | | 94 Ch. | DE Tip Code | |
| office or registered agent, or both, in the State of Florida, Such Change was authorized by the corporation is board of directors. I hereby accept the obligations of, section 607 0505, Florida Statutes. Deletered agent (are corporation as board of directors. I hereby accept the obligations of, section 607 0505, Florida Statutes.) SNATURE | | | | | |
| Signature, types optimistic and generated and the probability of the instruction instructins instructin instructins instruction instruction instruction ins | office or registered agent or both in th | ve State of Florida, Such chang | e was authorized by the cornora | oration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered | |
| OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 E PVST DELETE 1.11TLE Change Addition Image: Construction of the image of t | | stared ecent and title if ecolicsNe | (NOTE: Registered Agent signature of | quired when reinstation) DATE | |
| E MILLER, RANDY L 12 NAME EEF ADDRESS 9380 103RD ST., LOT 192 13 STREET ADDRESS ST.2P JACKSONVILLE FL 32210 14 CITY-ST-2P E D DELETE ET ADDRESS 9380 103RD ST., LOT 192 23 STREET ADDRESS ST.2P JACKSONVILLE FL 32210 24 CITY-ST-2P E D DELETE ST.2P JACKSONVILLE FL 32210 24 CITY-ST-2P ST.2P JACKSONVILLE FL 32210 24 CITY-ST-2P ST.2P JACKSONVILLE FL 32210 24 CITY-ST-2P ST.2P DELETE 31 TITLE ST.2P DELETE 31 STREET ADDRESS ST.2P ST.2P Change Addition Addition 32 NMAE ST.2P DELETE 31 TITLE ST.2P ST.2P Change Addition ST.2P ST.2P ST.2P Change | | | | • | 12 0 |
| EEF ADDRESS 9380 103RD ST., LOT 192 13 STREET ADDRESS ST:ZIP JACKSONVILLE FL 32210 14 OTV-ST-ZIP E D DELETE 21 TITLE S380 103RD ST., LOT 192 23 STREET ADDRESS Addition 9380 103RD ST., LOT 192 23 STREET ADDRESS Addition ST:ZIP JACKSONVILLE FL 32210 24 OTV-ST:ZIP E DELETE 31 TITLE Change Addition E JACKSONVILLE FL 32210 24 OTV-ST:ZIP Addition E 33 STREET ADDRESS 33 STREET ADDRESS Addition ST:ZIP JACKSONVILLE FL 32210 24 OTV-ST:ZIP Change Addition E DELETE 31 TITLE Change Addition ST:ZIP JACKSONVILLE FL 32210 24 OTV-ST:ZIP Change Addition E DELETE 31 STREET ADDRESS 32 STREET ADDRESS 33 STR | | | | Change Ad | idition |
| Bit Display Deletere 21 Title Change Addition E D Deletere 21 Title Change Addition E MILLER, RANDY L 23 STREET ADDRESS 23 STREET ADDRESS STZP Addition STZP JACKSONVILLE FL 32210 DELETE 21 Title Change Addition E DELETE 31 Title Change Addition E DELETE 31 Title Change Addition E DELETE 31 Title Change Addition STZP DELETE 31 Title Change Addition E DELETE 31 Title Change Addition STZP DELETE 31 Title Change Addition E DELETE STRET ADDRESS STRET ADDRESS STRET ADDRESS STZP DELETE S1 Title Change Addition E DELETE S1 Title Change Addition ET ADDRESS S3 STRET ADDRESS S3 STRET ADDRESS S3 STRET ADDRESS S3 STRET ADDRESS STZP S1 Title <td></td> <td>00</td> <td></td> <td></td> <td></td> | | 00 | | | |
| Bit Display Deletere 21 TITLE Change Addition E MILLER, RANDY L 23 NAME 23 STREET ADDRESS Change Addition ST2P JACKSONVILLE FL 32210 DELETE 21 TITLE Change Addition E DELETE 31 TITLE Change Addition E DELETE 31 TITLE Change Addition E DELETE 31 TITLE Change Addition ST2P DELETE 31 TITLE Change Addition E DELETE 31 TITLE Change Addition ST2P DELETE 31 TITLE Change Addition E DELETE 31 TITLE Change Addition ST2P DELETE 51 TITLE Change Addition E DELETE S1 TITLE Change Addition ST2P DELETE S1 TITLE Change Addition E DELETE S1 TITLE Change Addition ST2P S3 STREET ADDRESS S3 STREET ADDRESS S3 STREET ADDRESS <td< td=""><td></td><td></td><td></td><td></td><td>L S</td></td<> | | | | | L S |
| E MILLER, RANDY L 22 NAME EET ADDRESS 3380 103RD ST., LOT 192 23 STREET ADDRESS ST2P JACKSONVILLE FL 32210 24 CITY-ST-ZIP E DELETE 31 TITLE E 33 STREET ADDRESS 33 STREET ADDRESS ST-ZIP DELETE 31 TITLE E DELETE 33 STREET ADDRESS ST-ZIP SA CITY-ST-ZIP Change Addition 44 CITY-ST-ZIP E DELETE 41 TITLE E STREET ADDRESS STREET ADDRESS ST-ZIP 44 CITY-ST-ZIP Change Addition E DELETE \$1 TITLE Change Addition ST-ZIP 44 CITY-ST-ZIP Change Addition E ST-ZIP S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS ST-ZIP S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS ST-ZIP S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS ST-ZIP S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET | | | | Change Ad | C |
| SIT-ZP JACKSONVILLE FL 32210 24 CITY-ST-ZP E DELETE 31 TITLE Change Addition EE 33 STREET ADDRESS 33 STREET ADDRESS Addition SIT-ZP 34 CITY-ST-ZP Change Addition E DELETE 41 TITLE Change Addition E DELETE 51 TITLE Change Addition E S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS Str2P S1 STREET ADDRESS Str2P S1 STREET ADDRESS S1 STREET AD | | | | _ • _ | |
| E DELETE 3.1 TITLE Change Addition E 3.2 NAME 3.3 STREET ADDRESS S3.5 STREET ADDRESS ST-ZP DELETE 3.1 TITLE Change Addition E DELETE 1.1 TITLE Change Addition E DELETE 4.1 TITLE Change Addition E DELETE 4.1 TITLE Change Addition E Addition 4.2 NAME Addition Addition E DELETE 5.1 TITLE Change Addition E ST-ZIP Addition STREET ADDRESS Addition ST-ZIP Addition STREET ADDRESS Addition Addition E ST-ZIP STREET ADDRESS STREET ADDRESS Addition ST-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS Addition E STREET ADDRESS STREET ADDRESS Addition STREET ADDRESS STREET ADDRESS Addition ST-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| E 32 NAME SIZE 33 STRET ADDRESS SIZE 33 STRET ADDRESS SIZE 14 CITV-ST-ZIP E 42 NAME E 43 STRET ADDRESS SIZE 44 CITV-ST-ZIP E 43 STREET ADDRESS SIZE 44 CITV-ST-ZIP E 51 CITV-ST-ZIP E 51 CITV-ST-ZIP E 51 STREET ADDRESS SIZE 52 NAME E 52 NAME E 52 NAME SIZE 52 NAME SIZE ADDRE | | | | | |
| ET ADDRESS 3.3 STREET ADDRESS .str.2P 3.4 CITY-ST-2P E 0 DELETE 4.1 TITLE 0 Change 4.2 NAME 4.3 STREET ADDRESS .str.2P 4.4 CITY-ST-2P E 0 DELETE 4.1 STREET ADDRESS 4.3 STREET ADDRESS .str.2P 4.4 CITY-ST-2P E 0 DELETE 5.1 TITLE 0 Change Str.2IP 4.4 CITY-ST-2IP E 0 DELETE 5.1 TITLE 0 Change Str.2IP 4.4 CITY-ST-2IP E 0 DELETE 5.1 TITLE 0 Change Str.2IP 1 DELETE 5.1 TITLE 0 Change Str.2IP 1 DELETE 6.1 TITLE 0 DELETE 6.1 TITLE 0 DELETE 8.1 TITLE 0 Change 8.1 TITLE 0 DELETE 8.1 TITLE 0 Change 8.1 TITLE 0 | | | | | dition |
| ST-ZIP 34 CITY-ST-ZIP E DELETE 41 TITLE Change 42 NAME 43 STREET ADDRESS ST-ZIP 44 CITY-ST-ZIP E DELETE 51 TITLE Change Addition Addition E DELETE ST-ZIP 44 CITY-ST-ZIP E DELETE ST-ZIP 44 CITY-ST-ZIP E DELETE ST-ZIP 53 STREET ADDRESS ST-ZIP 54 CITY-ST-ZIP E DELETE ST-ZIP 54 CITY-ST-ZIP E DELETE ST-ZIP S4 CITY-ST-ZIP E DELETE ST-ZIP S4 CITY-ST-ZIP E S1 STREET ADDRESS S3 STREET ADDRESS Change Addition S2 NAME E S1 STREET ADDRESS S1 STREET ADDRESS S3 STREET ADDRESS S1 STREET ADDRESS S4 CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Flor | | | | | \backslash |
| E DELETE 4.1 TTLE Change Addition E Addition 4.2 NAME Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP E DELETE 5.1 TTLE Change Addition E DELETE 5.1 TTLE Change Addition E DELETE 5.1 TTLE Change Addition Strain DELETE 5.1 TTLE Change Addition E Strain DELETE 5.1 TTLE Change Addition Strain DELETE 5.1 TTLE Change Addition E Strain DELETE 5.1 TTLE Change Addition E Strain DELETE 6.1 TTLE Change Addition E Strain DELETE 6.1 TTLE Change Addition Strain DELETE 6.1 TTLE Change Addition Strain Strain Strain Strain Strain Strain I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florid | | | | and the search | \mathbf{X} |
| EET ADDRESS 4.3 STREET ADDRESS ST-ZIP 4.4 CITY-ST-ZIP E DELETE S1 TITLE Change Addition S2 NAME S2 NAME S2 NAME S3 STREET ADDRESS S3 STREET ADDRESS S3 STREET ADDRESS S4 CITY-ST-ZIP E Quick S4 Quick S4 S4 CITY-ST-ZIP E Quick S4 S4 CITY-ST-ZIP E Quick S4 Quick S4 S4 CITY-ST-ZIP E S1 STREET ADDRESS ST-ZIP 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 annual report or supplemental annual 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 o | E | | | Change Ad | dition |
| ST-ZIP 4.4 CITY-ST-ZIP E DELETE F S1 TITLE Change Addition S2 NAME S1-ZIP S3 STREET ADDRESS S3-ST-ZIP S4 CITY-ST-ZIP E S4 CITY-ST-ZIP E DELETE S4-CITY-ST-ZIP E DELETE S4-CITY-ST-ZIP E Change Addition E DELETE B- DELETE S1-TITLE Change Addition E S1-CIP E S1-CIP I DELETE 6.1 TITLE Change Addition S2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP I Intereby 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 annual 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 of the tory of the corporation or the receiver of the corporation | E | | 4.2 NAME | | N |
| E DELETE 5.1 TITLE Change Addition E 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS ST-ZIP 1 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP E 1 DELETE 6.1 TITLE Change Addition E 1 0 DELETE 6.1 TITLE Change Addition E 1 0 </td <td>EET ADDRESS</td> <td></td> <td></td> <td></td> <td></td> | EET ADDRESS | | | | |
| E 5.2 NAME SEET ADDRESS 5.3 STREET ADDRESS ST-ZIP 5.4 CITY-ST-ZIP E 0.1 TITLE B 0.1 TITLE B 0.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS ST-ZIP 6.4 CITY-ST-ZIP 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 annual 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 of the trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears | -ST-ZIP | | | | |
| EET ADDRESS 5.3 STREET ADDRESS ST-ZIP 5.4 CITY-ST-ZIP E 0.1 CITY-ST-ZIP E 0.1 CITY-ST-ZIP E 0.1 CITY-ST-ZIP 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 annual 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 of the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears | | | | L_ Change L_ Ad | atton |
| ST-ZIP 5.4 CITY-ST-ZIP E 9,5,5,6,6,7,7,7,8,7,7,7,7,7,7,7,7,7,7,7,7,7,7 | | | | | |
| E 0.1 TITLE Change Addition E 0.1 TITLE Change Addition EET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 annual report or supplemental annual 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears | | , | | | |
| E 9 1 | | | | Change Ad | dition |
| ET ADDRESS -ST-ZIP 6 3 STREET ADDRESS 6.4 CITY-ST-ZIP 1 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 annual report or supplemental annual 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears | 目 [御] 가 안 가 ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? | | | | |
| 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 annual report or supplemental annual 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 | | | - 1 | | |
| indicated on this annual report or supplemental annual 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 | E MARTINE AND A | | 6 3 STREET ADDRESS | | |
| 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 | E 🦉 🖓 🖓 🤅 🤅 🦾 🖓 🤅 🤅 STADDRESS 🔔 - ST-ZIP | | 6.4 CITY-ST-ZIP | | |
| | E 3 | lied with this filing does not qua | 6.4 CITY-ST-ZIP | ction 119.07(3)(i), Florida Statutes. I further certify that the information | |

P980000 13547 602289-90007-12

R Miller Excavating, Inc. PO Box 16952 Jacksonville, FL 32245-6952 904-733-4547

July 31, 1999

Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: P98000013547 Corporate Annual Report

Dear SOS:

Enclosed is my check for \$150 for my corporate annual report. Please accept this check and my return as filed timely. I just found out the original first notice was never received by your office. I filed the original return timely. I've carried CK#1257 as outstanding on my bank reconciliation since it was written on 4/30/99 and didn't realize it was to the Secretary of State. When I got your second notice is when I started doing some checking and realized that my check was never cashed and my return apparently never made it to your office. I filed the original return timely but apparently it was lost in the mail. It is not my fault that the post office didn't deliver the return to you. Please do not charge me the \$400 penalty as I filed on time. Enclosed is a copy of my original return that I filed timely. I didn't make a copy of my check and since it didn't clear the bank, I can't produce that, but I could show you my bank rec's showing the check was held as outstanding all this time if need be.

Please let me know if you are accepting this as filed timely.

Thank you,

Randy Miller

Randy Miller Owner

RM/dc enclosure