

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90372 031 ***150.00

DOCUMENT # P98000014759

1. Entity Name

MILES FINANCIAL INC.

Principal Place of Business

**7278 NW 47 PL
 FORT LAUDERDALE FL 33319**

Mailing Address

**7278 NW 47 PL
 FORT LAUDERDALE FL 33319**

2. Principal Place of Business

5369 HIATUS ROAD

Suite, Apt. #, etc.

3. Mailing Address

5369 HIATUS ROAS

Suite, Apt. #, etc.

City & State

SUNRISE, FL

City & State

SUNRISE, FL

Zip

33351

Country

Zip

33351

Country

4. FEI Number

65-0813363

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MOCKYEN, BARBARA
 100 SE 8TH AVE
 FORT LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name **RUTH LIVERPOOL, CPA**

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

8428 W. OAKLAND PARK

City

SUNRISE

FL

Zip Code **33351**

8. The above named entity is making this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

[Handwritten Signature]

04-30-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 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 **D** ☐ Delete
 NAME **MOCKYEN, BARBARA**
 STREET ADDRESS **7278 NW 47 PL**
 CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **MOCKYEN, BARBARA**
 STREET ADDRESS **5369 HIATUS ROAD**
 CITY-ST-ZIP **SUNRISE, FL 33351**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-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 an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01

Date

(954) 461-8421

Daytime Phone #

CR2E034 (10/00)

Lass ACCOUNTING &
BUSINESS SERVICES, INC.

8428 W OAKLAND PARK BLVD. SUNRISE FLORIDA
33351
phone (954)-746-5011.

Attachment
P98000014759
769619

-May-9, 2001-

Division Of Corporations,
Uniform Business Report Filing.
P.O Box 1500,
Tallahassee, Fl. 32302-1500

RE: Miles Financial
Document # P98000014759

BOOKED

Dear Sirs,

Please find enclosed, 2001 annual business report. Kindly forgive my client's late filing, please note it is one week late, as she was out of the country for a long period of time, and did not anticipate such a late return. Please contact us at 954-746-5011, should you require further information.

SINCERELY,



Ruth Liverpool.