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

PROFIT CORPORATION. ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000034687

1. Corporation Name

MICHAEL J. MULLER INC.

Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90035 027 ***158.75



•									
Principal Place of Business	Mailing Address					**** ***** ***** *****	****** ****** ******		
55 W. CHURCH ST., STE. 240		55 W. CHURCH ST., STE. 240							
ORLANDO FL 32801	FL 32801 ORLANDO FL 32801				DO NOT WRITE IN THIS SPACE				
	•			• 3. Date	e Incorporated or Qua	lifed			} ;
				04/	/14/1998				1
2. Principal Place of Business	ncipal Place of Business 2a. Mailing Address			4. FEI	Number 0.10	1112		plied For	_
21 55 W. Church St					79-347-0	edd I		t Applicable	-{ ;
Suite, Apt. #, etc.	Suite, Apt. #, etc. ~ 27	,	5. Cer	tifcate of Status Desir	ed X	- \$8.75 A	quired	,	
City & State 23 OR ANDO, FI-	City & State 28				6. Election Campaign Financing S.00 May Be Trust Fund Contribution Added to Fees				
Zip Country	Zip Country				8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☑No				
24 32801 25 BRANGE	29			sonal Property Tax.	1 B1-1		∐'No	┤ .	
9. Name and Address of Curren	t Registered Agent		81 Name	10. Nar	me and Address of N	lew Registered	Agent		┤ .
MULLER, MICHAEL J				Mich	ael	Muller	<u> </u>		1
3248 CURRY WOOD CIRCLE		82 Street		Box Number is Not Ac	1 7 7				
ORLANDO FL 32822			83 Jal	18 Lu	irry wood	<u> </u>			1 :
-							r 1 = -		1
			84 City	Dolan.	do	FL	85 Zip C	Sode 1822	
11. Pursuant to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the al	ove-named	corporation sub	omits this statement for	r the purpose of	changing its	registered	-
office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga	of Florida. Such change was au	ithorizea	by the corp	oration's board	of directors. I hereby	accept the appoi	ntment as req	gistered	<u>}</u>
$Q_A \cdot I \cdot I \cdot I \cdot I \cdot I$	Marilla -	ida Olok				3	-23-9	9	
SIGNATURE Signature, typed or printed name of registered age	n and title if applicable. (NOTE:	Registered	Agent signature r	required when reinsta		DATE	<u> </u>		- 6
12. OFFICERS AN	ID DIRECTORS	13.		ADD	ITIONS/CHANGES T	O OFFICERS AN			(11/98)
TILE PRESIDENT TUIC	c PRes. DELETE	1.1 111		"			☐ Change	Addition	7
Michael J. Muller STREET ADDRESS 3248 CURRY WOOD CIN			1.2 NAME						CR2E034
			1.3 STREET ADDRESS				-		122
CITY-ST-ZIP ORIANDO FI-	9 2822 □ DELETE		Y-ST-ZIP				☐ Change	۔۔۔ ا Addition	1.6
CI. DONCE PRUSALT	CLARNCE PRUSAITIS		2.1 TITLE 2.2 NAME		مداخوشها يسرسان		د	- *	١.
- AAIII CABICLIA	ecti -		REET ADDRESS			• • • • • • • • • • • • • • • • • • • •			
	32738		TY-ST-ZIP	-	-		,		
TITLE DETTONA FI	. ∂ <i>A / 38</i> □ DELETE	3.1 TIT					~ Change	Addition	
[3.2 NA				-			- 1
NAME STREET ADDRESS			REET ADDRESS		<u></u>				-
CITY-ST-ZIP		_	TY-ST-ZIP						
TITLE	DELETE	4.1 TII					Change	Addition	-]
NAME		4.2 N	AME						
STREET ADDRESS		4.3 57	REET ADDRESS]					
CITY-ST-ZIP			TY-ST-ZIP	1					
TITLE	☐ DELETE	5.1 TIT			<u></u>		Change	☐ Addition	
NAME	•	5.2 NA	ME						{
STREET ADDRESS		5.3 ST	REET ADDRESS						
CITY-ST-ZIP			TY-ST-ZIP	ļ <u></u>			<u></u>		1
TITLE	☐ DELETE	6.1 TI					Change	Addition	-
NAME		6.2 N	ME						
STREET ADDRESS		6.3 ST	REET ADDRESS]					
CITY ST 7ID		6.4 CI	TY-ST-ZIP	1					1

14. 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.