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**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P99000030781**

1. Entity Name

JAMES A Milner-Blacksmith, Inc

DO NOT WRITE IN THIS SPACE

FILED

02 JUL -8 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

1965 S Ocean Dr

3. Mailing Address

Suite, Apt., #, etc.

BNGLE

Suite, Apt., #, etc.

City & State

HALLANDALE, FL

City & State

Zip **33009**

Country **USA**

Zip

Country

4. FEI Number

65-0908735

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

JAMES A Milner

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

1965 S OCEAN Drive

BNGLE

City

HALLANDALE

FL

Zip Code

33009

**DO NOT WRITE
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.

SIGNATURE

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)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST Milner, James A
1965 S. Ocean Drive BNGLE
HALLANDALE, FL 33009

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

300006348543-4
-07/12/02--01029--003
******458.75 ****458.75**

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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

James A. Milner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/02

Date

954-401-1965

Daytime Phone #

CR2E034B (12/01)

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To: DEPARTMENT OF STATE
REINSTATEMENT DIVISION
409 EAST GAINES STREET
TALLAHASSEE, FL 32314

From: JAMES A MILNER-BLACKSMITH, INC.
1965 S OCEAN DRIVE APT BNGLE
HALLANDALE, FL 33009
FL Doc #P99000030781
EIN #65-0908735

RE: Reinstating Corporation

June 13, 2002

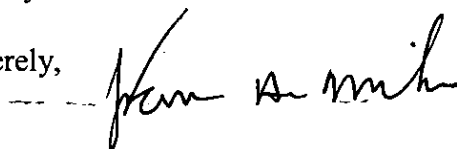
Attn: Katherine Harris;

I was putting together some of my papers for my accountant when he noticed that the state dissolved my corporation for lack of annual report. I have never received any annual reports to my above address.

Please accept the filling fees for the Annual Report for year 2000, 2001, & 2002 of \$450.00. Also, please send my, certificate of status. The \$8.75 fee is also included.

Thank you.

Sincerely,



James Milner
President of James A Milner-Blacksmith, Inc.