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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # V12745

(8)

WARNER B. MILLER, III, P.A.

Principal Place of Business	М
400 SOUTHEAST 18TH STREET	40

FILED

Jan 14 1997 8:00am Secretary of State



Principal Place of Business		Mading Address						
	ST 18TH STREET IDALE FL 33316	400 SOUTHEAST 18TH FORT LAUDERDALE FL						
					3. Date Incorporated or Qualified 02/10/1992	3a. Date 04/25	of Last R	eport
	Place of Business	2a. Mailing Address			4. FEI Number			oplied For
Suite, Apt	# oto	26 Suite, Apt. #, etc.			65-0311865			ot Applicabl
22 Suite, Apr	#, E;C	27 Stite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & Stat	le	City & State		···	6. Election Campaign Financing			May Be
23		28			Trust Fund Contribution		Added	
Zip	Country	Z _' p	Country	у	8. This corporation has liability for it			. 199.032,
4	25	29	30			Yes 💢		
	9. Name and Address of Curr	ent Registered Agent	81	Name	10. Name and Address of New Re	gistered Ag	ent	
	LER, WARNER B "CHIP"		61	Name				
	S.E. 18TH STREET RT LAUDERDALE FL 33316		82	Street Add	dress (P.O. Box Number is Not Acceptable)			
rur	11 LAUDENDALE LE 22210		83	<u> </u>				
				1 6.	7-110		aa 2:	0-4-
			84	City		FL	85 Zip	Code
12.	Signature: typed or printed isamic of registated a OFFICERS A	agent and tree if applicable (N ND DIRECTORS	NOTE Registered Ag	gent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND D	IRECTOF	RS IN 12
TITLE	P	DELETE	1.1 TITLE				Change	Additi
NAME	MILLER, WARNER B "CHIP"		1.2 NAME					
STREET ADORESS	400 S.E. 18TH STREET		1.3 \$18EE	T ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-	ST-ZIP				
tore t								
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TITLE NAME		☐ DELETE	22 NAME				Change	Additi
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I have a supplied with the information supplied with this still globes not quality for the exemption stated in Section 119.07(5)(f), Florida Statutes. I further termity 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 product 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 I changed, or on an attachment with an additions.

ICER OR DIRECTOR