FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996					
DOCUMENT	#				

SIGNATURE: (

V40731

(4)

1. Corporation	name	• •			
MIAM	I, INC.			 	TERN ANDRE BURKE BURKE BURKE BERNE BURKE BORE
Principa! Place	of Business	Mailing Address			
425 38TH	SOUARE, S.W.	425 38TH SQUARE	ew		
	CH FL 32963	VERO BEACH FL 3			
				3. Date Incorporated or Qualified	3a. Dale of Last Report
				06/03/1992	03/22/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3129181	Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23	;	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for inte	
24	25	29	30	Florida Statutes 🔯 Yes	
	Name and Address of Curre	nt Registered Agent		10. Name and Address of New Reg	istered Agent
			81 Name		
HENDE	erson, steven L		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	EACHLAND				
VERO	BEACH FL 32963		83		
			84 City		85 Zip Code
44 Duranast t	a the equiplement Sections 607 040	0 and 607 1509 Florida Ptat.	too the observe somed some	of on a basile this state and for the	FL " 2p cooc
or register	ed agent, or both, in the State of Flor	ida. Such change was author	ized by the corporation's boa	ration submits this statement for the purpourd of directors. Thereby accept the appoin	tment as registered agent. I am
	th, and accept the obligations of, Sec	tion 607.0505, Florida Statute	25.		
SIGNATURE .	Signature, typed or printed name of registered ager	ntandina ifappirate (1	iOTE. Registered Agent's griature require	ed when reinstating	DATE
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1 THEF		☐ Change ☐ Addition
NAME	MODGLIN, JAMES D		1.2 NAME		
STREE1 ADDRESS	4141 OCEAN DR., #303		1.3 STREET ADDRESS		
CHY-SI-ZIP	VERO BEACH FL	T DELETE	1.4 CITY - ST - ZIP		Change Cl Addition
Title NAME	ST Arthur-Irby, Carol A		2 1 TITLE 2 2 NAME		Change Addition
STREET ADDRESS	425 38TH SQUARE, SW	•	2.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		2 4 CITY - ST - ZIP		
TITLE	VENIO DESCRIPTE	DELETE	3.1 TITLE		Change Addition
NAM6			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY+S1+ZIP		
TIFLE		DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-SI-2IP		☐ DELETE	4.4 CITY - ST - ZIP		D Observe D Address
TITLE		☐ DELETE	5. † TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME		
CITY-S1-ZIP			5.3 STREET ADDRESS 5.4 CITY - ST-ZIP		
TITLE		☐ DELETE	6 1 THLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST- ZIF		
14. I do hereb	y certify that the information supplied	with this filing is voluntarily fu	rnished and does not qualify t	for the exemption stated in Section 119.07 ate and that my signature shall have the sa	(3)(k), Florida Statutes, I further
oath; that	r the information indicated on this and I am an officer or director of the corp i Block 12 or Block 13 if changed, or	oration or the receiver or trust	tee empowered to execute th	ate and that my signature shall have the sa is report as required by Chapter 607, Flori	ine legal effect as it made under da Statutes; and that my name

Silvy Carol A. (Arthur) Irby 2-28-96 407-569-8330