

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 MAR 30 PM 2: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #
A98000002109

MILLENNIUM OPTIONS, LTD.

Mailing Address

433 PLAZA REAL SUITE 365
BOCA RATON FL 33432

Principal Office Address

433 PLAZA REAL SUITE 365
BOCA RATON FL 33432

3. Date Formed or Registered

09/10/1998

5a. Capital Contributions as
Shown on record

\$7,500.00

3a. Date of Last Report

4. State or Country of Formation

FL

5b. Amount of Capital
Contributions in FLORIDA
to date

\$ 7,500

2. Mailing Address

210-174 Street

2a. Principal Office Address

210-174 Street

Suite, Apt. #, etc.
Apt. 2201

Suite, Apt. #, etc.
Apt. 2201

City & State
North Miami Beach, FL

City & State
North Miami Beach, FL

Zip Country
33160 USA

Zip Country
33160 USA

6. FEI Number 65-0897940

~~65-0897940~~

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

B & C CORPORATE SERVICES, INC.
201 S. BISCAYNE BLVD., SUITE 3000
MIAMI FL 33131

10. If changed, new Registered Agent/Office

Name
Shechter Asset Management, LLC

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

210-174 Street

Suite, Apt. #, etc.

Apt. 2201

City

North Miami Beach

FL

Zip Code

33160

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE 3/14/99

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

SCHECHTER ASSET MANAGEMENT,

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

433 PLAZA REAL, SUITE 365

11b. City, State & Zip Code

BOCA RATON FL 33432

11c. Registration/
Document Number

L98000001795

0000028325.10--8

-04/07/99-01083-016

****141.25 ****141.25

SL
4-6-99

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE 3/14/99

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (12/98)