2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000006991

Entity Name: MILLENNIUM MORTGAGE CAPITAL COMPANY

FILED Oct 04, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ITEREY AVE ERT, CA 922				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
43645 MONTEREY AVE STE D PALM DESERT, CA 922609309					
FEI Number:	33-0753543	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
CERRETA, 1308 SONC PALM BEAG		S, FL 33410 US			
The above r		submits this statement for the pu	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: JOHN CERRETA					
	Electron	ic Signature of Registered Ager	nt	Date	
		3(2)(b), F.S., the corporation did not	receive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PLATT, BRENT 43645 MONTER	Delete REY AVE STE D , CA 922609309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PLATT, BRENT 43645 MONTER	Delete REY AVE STE D C, CA 922609309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FARRIS, KELLY 43645 MONTER	Delete Y REY AVE STE D ; CA 922609309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LOPEZ, VERON 43645 MONTER	Delete NICA REY AVE STE D , CA 922609309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SHERRY, MIKE 43645 MONTER	Delete E REY AVE STE D C, CA 922609309	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FARIAS, ILEAN	RNANDO MISSION BLVD. #200	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENT PLATT **CDPS** 10/04/2007 Date