

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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



FILED

98 AUG 14 PM 2:35
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **F96000005087**

1. Corporation Name
MILLENIUM CAPITAL CONSULTING CORPORATION

Principal Place of Business Mailing Address

1128 SW 26th Avenue
BOYNTON BEACH, FL 33426

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT

97-98
 AD

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.
 City & State
 Zip Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
 City & State
 Zip Country

4. Date Incorporated or Qualified To Do Business in Florida
October 1, 1996

5. FEI Number
13-3900541

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
President CEO	Mark V. Antonucci	1128 SW 26th Ave	Boynton Beach FL 33426

200002616362--4

8. Name and Address of Current Registered Agent

THE COMPANY CORPORATION
1313 N. Market St.
Wilmington, DE 19801

9. Name and Address of New Registered Agent

Name **Mitchell C. Fogal**
 Street Address (P.O. Box Number is Not Acceptable)
2499 Glades Road
 Suite, Apt. #, Etc.
Suite #105
 City **Boca Raton** State **FL** Zip Code **33431**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent **[Signature]** REGISTERED AGENT MUST SIGN Date **8/12/98**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: **[Signature]** SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **President/CEO** Date **8/12/98** Daytime Phone # **561 369 1967**

CR2E040 (1-98)



ACCOUNT NO. : 072100000032
 REFERENCE : 927933 100198A
 AUTHORIZATION : *Patricia Pizant*
 COST LIMIT : \$ 900.00

ORDER DATE : August 14, 1998
 ORDER TIME : 10:20 AM
 ORDER NO. : 927933-005
 CUSTOMER NO: 100198A
 CUSTOMER: Lisa Bohrer, Legal Asst
 Mitchell C. Fogel, P.a.
 Suite 105
 2499 Glades Road
 Boca Raton, FL 33431

DOMESTIC FILINGS

NAME: MILLENIUM CAPITAL CONSULTING CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds
 EXAMINER'S INITIALS _____

RECEIVED
 98 AUG 14 AM 11:34
 DIVISION OF CORPORATION