## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE

## **DOCUMENT # L03000005542** 03-02-2005 90016 038 \*\*\*\*50.00 MILLENNIUM HOLDINGS, L.L.C. Principal Place of Business Mailing Address 20017063 2800 WESTON ROAD STE. 204 2800 WESTON ROAD STE. 204 WESTON, FL 33331 WESTON, FL 33331 2. Principal Place of Business 3. Mailing Address Suite, Apt. #; etc. Suite, Apt. #, etc. 02182005 Chg-LLC CR2E083 (10/03) City & State City & State 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent EPELBOIM NOEL LEGAL INFORMATION SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 1290 WESTON ROAD STE. 300 WESTON, FL 33326 2800 WESTON ROAD SUITE 103 WESTON 8. The above named entity submits this statement to the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obtigations of registered agent Signature, typed or printed d title if applicable. (NOTE: Registered Agent signature required when reinstating Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TITLE MGR TITLE Change ☐ Addition C Delete MILLENNIUM HOLDINGS MANAGEMENT, INC. NAME NAME 2800 WESTON ROAD STE, 204 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON, FL 33331 CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee employed to execute this report as required by Chapter 608, Florida Statutes.

SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED Mar 02, 2005 8:00 am

**Secretary of State**