## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000005110

FILED May 31, 2007 Secretary of State

Entity Name: NEW MILLENNILIM ARTISTIC PRODUCTIONS INCORPORATED

Current F	Principal Place of Business:	New Principal Place of Business:
PO BOX ( MIAMI, FL	470925 _ 332470925	2827 NW 47 STREET MIAMI, FL 33142
Current I	Mailing Address:	New Mailing Address:
2827 NW MIAMI, FL	47 STREET _ 33142	
n accorda	or: 34-1999118 FEI Number Applied For ( nce with s. 607.193(2)(b), F.S., the corporation d Address of Current Registered Age	did not receive the prior notice.
2827 NW	ARRY D DR. 47 STREET	
MIAMI, FL	_ 331423500 US	
The abov		r the purpose of changing its registered office or registered agent, or both
The abov	e named entity submits this statement fo te of Florida.	r the purpose of changing its registered office or registered agent, or both
The abov n the Sta	e named entity submits this statement fo te of Florida.	
The abov n the Sta	e named entity submits this statement fo te of Florida. JRE:	
The abov n the Sta	e named entity submits this statement for te of Florida.  JRE: Electronic Signature of Registere RS AND DIRECTORS:  P () Delete CAPP, LARRY D DR. 2827 NW 47 STREET	ed Agent Date
The aboven the Standard SIGNATU  OFFICER  Fittle:  Name:  Address:	e named entity submits this statement for te of Florida.  JRE:  Electronic Signature of Registere  RS AND DIRECTORS:  P () Delete CAPP, LARRY D DR. 2827 NW 47 STREET MIAMI, FL 331423500  D () Delete CAPP, JABARI MR. 19809 NW 67 COURT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO  Title: ( ) Change ( ) Addition  Name: Address:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY D. CAPP P 05/31/2007