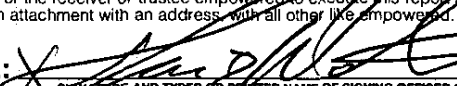


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2004 8:00 am
Secretary of State

07-13-2004 90001 014 ***150.00

DOCUMENT # P00000053316 1. Entity Name MILLENNIUM 2000 CONSTRUCTION CORPORATION					
Principal Place of Business 2128 WEMBLEY WAY TALLAHASSEE, FL 32308			Mailing Address 2128 WEMBLEY WAY TALLAHASSEE, FL 32308		
2. Principal Place of Business 656 E NE Capital Circle			3. Mailing Address Same		
Suite, Apt. #, etc. Suite E			Suite, Apt. #, etc. 		
City & State Tallahassee, FL			City & State 		
Zip 32301		Country USA		Zip 	
Country 		4. FEI Number 59-3649324			
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WATERS, THOMAS D 2128 WEMBLEY WAY TALLAHASSEE, FL 32308				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City 	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	
SIGNATURE _____				DATE _____	
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				10. OFFICERS AND DIRECTORS	
TITLE PCEO		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
NAME WATERS, THOMAS D		TITLE 			
STREET ADDRESS 2128 WEMBLEY WAY		NAME 			
CITY-ST-ZIP TALL, FL 32308		STREET ADDRESS 			
CITY-ST-ZIP 		CITY-ST-ZIP 			
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CITY-ST-ZIP 		CITY-ST-ZIP 			
12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
July 7, 04 #942-7002					