## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 22, 2002 8:00 am Secretary of State

DOCUMENT # P0000	00062097		05-22-	-2002 90240 046 ***150.00
Millenium Investmen	nt And Insuran	ce Services,	(	
THC.			-	
DO NOT WRI	ITE IN THIS	SPACE		
2. Principal Place of Business	3. Mailing Address		-	
•	7160 Fairwa	v Drive		•
7160 Fairway Drive Suite, Apt. #, etc.	Suite, Apt. #, etc.	y	DO NOT WE	RITE IN THIS SPACE
Unit J9	Unit J9		~	Applied For
City & State	City & State		4. FEI Number	Not Applicable
Hialeah, Florida	Hialeah, Fl		65-1025008	CQ 75 Additional
Žip Country	Zip	Country	5. Certificate of Status Desired	X Fee Required
33014 USA	33014	LUŞA	7. Name and Address of Curre	nt Registered Agent
والمستقال المستقال ال	-	Name		
DO NOT WRITE		From Address	tia Thomas	ble)
		_716	Street Address (P.O. Box Number is Not Acceptable) 7160 Fairway Drive, Unit J9	
IN THIS	SPACE			
		City		Zip Code
		Hia	leah	FL Zip Code 33014
		n its registered office or regist	ered agent, or both, in the State of	Florida.
The above named entity submits this state	ement for the purpose of changin	19 10 10 9 10 to 1 - 1 - 5 - 1		
8. The above named entity submits this state	ement for the purpose of changin	-g 1.5 (		
outest				05-01-02
8. The above named entity submits this state  SIGNATURE  Signature, typed or printed name of register		(NOTE: Registered Agent signature requi		05-01-02 DATE
SIGNATURE Signature, typed or printed name of register.  9. This corporation is eligible to satisfy its International Corporation in the International	ered agent and title if applicable.  Itangible January After	(NOTE: Registered Agent signature requi 1 - May 1 Fee is \$150.00 May 1, Fee is \$550.00		Financing \$5.00 May Be
SIGNATURE Signature, typed or printed name of register	ered agent and title if applicable.  Itangible January  After  Ame	(NOTE: Registered Agent signature requi	red when reinstating)  10. Election Campaign Trust Fund Contribu	Financing \$5.00 May Be
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of the corporation or the receiver or trustee empowered to attachment with an address, with all other like empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-01-02