

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000038592

Entity Name: NEW MILLENIUM MEDICAL, INC.

FILED
Apr 05, 2005
Secretary of State

Current Principal Place of Business:

222 LAKEVIEW AVENUE
PMB 435
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

222 LAKEVIEW AVENUE
PMB 435
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 65-1098393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINTMIRE, DONALD F
265 SUNRISE AVENUE
SUITE 204
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

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.

SIGNATURE: DONALD F. MINTMIRE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: GOUVERNEUR, PATRICK
Address: 222 LAKEVIEW AVENUE PMB 435
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: GUTIERREZ, CHRISTIAN
Address: 222 LAKEVIEW AVENUE PMB 435
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTIAN GUTIERREZ

PSTD

04/05/2005

Electronic Signature of Signing Officer or Director

Date