

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000044610

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

**Entity Name:** THE MILLENNIUM FINANCIAL CENTER, INC.

**Current Principal Place of Business:**

5546 WEST OAKLAND PARK BLVD SUITE 207  
LAUDERHILL, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

5546 WEST OAKLAND PARK BLVD SUITE 207  
LAUDERHILL, FL 33313

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOBBAN, NORMAN A  
7220 NW 44TH COURT  
LAUDERHILL, FL 33319

**Name and Address of New Registered Agent:**

CASTILLA, ROBERTO M  
400 LESLIE DR  
APT 11108  
HALLANDALE, FL 33009

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: ROBERTO CASTILLA

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LOBBAN, NORMAN A  
Address: 7220 NW 44TH COURT  
City-St-Zip: LAUDERHILL, FL 33319

Title: VTD ( ) Delete  
Name: PURANDA, KEVIN M  
Address: 4620 NW 71ST AVENUE  
City-St-Zip: LAUDERHILL, FL 33319

Title: VSD (X) Delete  
Name: CASTILLA, ROBERTO M  
Address: 400 LESLIE DR UNIT 400  
City-St-Zip: HALLANDALE, FL 33009

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CASTILLA, ROBERTO M  
Address: 400 LESLIE DR APT 1108  
City-St-Zip: HALLANDALE, FL 33009

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERTO CASTILLA

PD

04/30/2002

Electronic Signature of Signing Officer or Director

Date