

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 12, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000098975

1. Entity Name
MILLENNIUM MAINTENANCE & REPAIR, INC.



Principal Place of Business
613 EL CAMINO REAL S
LAKELAND, FL 33813

Mailing Address
613 EL CAMINO REAL S
LAKELAND, FL 33813



04092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1144753

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROBERT RITTER
613 EL CAMINO REAL S
LAKELAND, FL 33813

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IN THIS SPACE

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 *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/10/07
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME RITTER, ROBERT L
STREET ADDRESS 613 EL CAMINO REAL S
CITY-ST-ZIP LAKELAND, FL 33813

TITLE VP
NAME RITTER, CLAUDIA M
STREET ADDRESS 613 EL CAMINO REAL S
CITY-ST-ZIP LAKELAND, FL 33813

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04/20/07-80040-023 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/07
Date

(863) 409-0675
Daytime Phone #