2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P02000000829 DOCUMENT

1. Entity Name

J. MILLET ENTERPRISES, INC.

SIGNATURE:



FILED Feb 12, 2003 8:00 am Secretary of State 02-12-2003 90103 018 ***150.00

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Principal Place 3467 STIRLING DAVIE FL 33314	RD	Mailing Address 6467 STIRLING RD DAVIE FL 33314									
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		655	3 5+12	lina	RA						
2. Principal Place of Business 6553 Stirling RD Suite. Apt. #, etc. 3. Mailing Address 6553 Stirl Suite, Apt. #, etc.							CHECK HERE IF MAKING CHANGES				
Suite, Apt. #	F, BIC.	Gaile, 7	,pt, 515.					GE CLIE			
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<u> 333/</u>	6. Name and Address of Curren			,			7. Name a	nd Address	of New Register	ed Agent	
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8. The above	named entity submits this statement	for the purpose	e of changing its	s registere	ed office or	registered	d agent, or	both, in the	State of Florida.	am tamıllar wilib. 	anu accepi
the obligati	one of registered agent.										
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SIGNATURE -	Signature, typed by printed name of registered age	ent and title if applica	ble. (NO	TE: Registere	d Agent signati	ure required w	hen reinstating	1	DA	ΝΤΕ Ι	
After	ILE NOW!!! FEE & \$150.00 May 1, 2003 Fee will be \$550.0 Payable to Floride Department	0 of State					9.		mpaign Financing Contribution.		00 May Be d to Fees
			 -	11.			ADDITIO	NS/CHANGI	ES TO OFFICERS	AND DIRECTOR	RS IN 11
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12. I hereby indicates of the co-	certify that the information supplied d on this report or supplemental report progration or the receiver or trustee e d, or on an attachment with an addre	with this filing or ort is true and a repowered to e ss, with all othe	does not qualify courate and that xecute this report or like empower	for the ex at my sign ort as requed.	emption sta ature shall uired by Ch	ated in Se have the s napter 607	ection 119.0 same legal 7, Florida St	7(3)(i), Florid effect as if natutes; and t	da Statutes. I furth nade under oath; t hat my name app	er certify that the that I am an offic éars in Block 10 	er or director or Block 11 if