

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 NOV 24 PM 12:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000054528

1. Corporation Name

THE MILLENNIUM COMPANY, INC.

Principal Place of Business

Mailing Address

~~7168 EDGEWATER SHORES COURT  
ORLANDO FL 32810~~

~~7168 EDGEWATER SHORES COURT  
ORLANDO FL 32810~~



REINSTATEMENT 03

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

05/16/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Orlando, FL 32860-8512

P.O. Box 608512

City & State

City & State

Orlando Florida

5. FEI Number

22-3866906

Applied For

Not Applicable

Zip

Country

Zip

Country

32860-8512 USA

32860-8512 USA

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
CEO	KING, PAUL R	<del>7168 EDGEWATER SHORES COURT, P.O. Box 608512,</del>	ORLANDO FL 32810 Orlando, FL 32860-8512

500024981815  
11/24/03--01093--014 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KING, PAUL R

~~7168 EDGEWATER SHORES COURT  
ORLANDO FL 32810~~

Name

~~KING, PAUL R~~

Street Address (P.O. Box Number is Not Acceptable) NEW ADDRESS

458 CYPRESS STREET

Suite, Apt. #, Etc.

City

ALTAMONTE SPRINGS

State

FL

Zip Code

32714

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

SIGNATURE REQUIRED

Date

11/7/03

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/10/03

Daytime Phone #

407-702-5981

CR2E040 (7/03)

The Millennium Company Inc.  
P. O. Box 608512  
Orlando FL 32860  
November 18, 2003

Private and Confidential

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Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern,

This is a letter informing you that the letters from the Division of Corporations were never received. The address changed for the company in November 2002. We have just received the information regarding the company being dissolved. Enclosed there is a check and the necessary documentation that needs to be filled out to have this rectified. Also on the documentation it reflects the current mailing address. If you have any further questions or need more information please contact us at 407-702-5981 or by mail at the address provided.

Sincerely,

Handwritten signature in black ink, appearing to be the initials 'ZK'.