

2004 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90411 010 ***150.00

DOCUMENT # P02000087601
1. Entity Name
NEW MILLENIUM TRANSPORTATION SERVICES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3021 NW 23 TERRACE
Suite, Apt. #, etc.

3. Mailing Address
8360 W FLAGLER STREET
Suite, Apt. #, etc.
206

City & State
MIAMI, FL

City & State
MIAMI, FL

Zip 33142-7003 **Country** US

Zip 33144 **Country** US

4. FEI Number
80-0118646

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

40076299

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7. Name and Address of Current Registered Agent

Name
LEDON, JORGE F.

Street Address (P.O. Box Number is Not Acceptable)
3021 NW 23 TERRACE

City **FL** Zip Code
MIAMI 33142

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

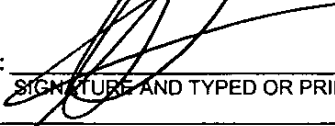
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSVT LEDON, JORGE F. 3021 NW 23 TERRACE MIAMI, FL 33142
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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **JORGE LEDON**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/19/06 Daytime Phone #