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May 22, 2003 8:00 am
Secretary of State
04-28-2003 91436 014 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000088248

1. Entity Name
MILLENNIUM WALL SYSTEMS, INC.

55043010

Principal Place of Business	Mailing Address
33753 CAMERTON ROAD ZEPHYRHILLS, FL 33543	33753 CAMERTON ROAD ZEPHYRHILLS, FL 33543

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 56-2256177 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CARMICHAEL, DONALD L 33753 CAMERTON ROAD ZEPHYRHILLS, FL 33543	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 ______ DATE ______

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	CARMICHAEL, DONALD L ☐ Delete	NAME	
STREET ADDRESS	33753 CAMERTON ROAD	STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33543	CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Donald L Carmichael 4-23-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

My Cell pHone 813 918 0086 Donald