FOR PROFIT CORPORATION. **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000116351 MILLINIUM ELECTRIC OF FLORIDA, INC.



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SELUCIARY OF STATE TALLAHASSEE, FLORIDA

				,	
DO	NOT	WRIT	FIN	THIS	SPACE

* <u>1.00 </u>	<u> </u>
2. Principal Place of Business	3. Mailing Address
2252 NW 29TH STREET	PO BOX 9891
Suite, Apt. #, etc.	Suite, Apt. #, etc.

2252 NW 29TH STREET		PO BOX 9891						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & State			City & State			4	FEI Number Applied For	
FT. LAUDERDALE, FL			FORT LAUDERDALE. FL				Not Applicable	
33311		Country:	33311	USA		5	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required	
. "			ş ,		NI		Name and Address of Current Registered Agent	
					Name A	ANDRE LUDERS		
DO NOT WRITE IN THIS SPACE				Street Addres		D. Box Number is Not Acceptable) NW 29 th Street		
			ACE			X 9891		
Bernard Bernard Bernard					City FORT LAUDERDALE FL Zip Code 33311			
the obligat	e named entity tions of registe		lhe purpose of changing its	register	ed office or	registered	agent, or both, in the State of Florida. Lam familiar with, and accept 09/29/0301037009 **150.00	
SIGNATURE	Signature, typed	or printed name of registered agent an	d title if applicable. (NOTI	: Reg-stere	đ Agent signatu	re required whe	en re-nstating) DATE	
	After May 1 Amended	y 1 Fee is \$150.00 , Fee is \$550.00 UBR is \$61.25 Florida Department of S	itate -				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.		OFFICERS AND D	IRECTORS			<u></u>		
NAME STREET ADDRESS CITY-ST-ZIP	2252 NV	D LUDERS V 29TH STREET DEPOALE EL 333	11				700023398057 03/29/03-01037009 **150.00	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					E .^ Et address - St- Zip		8 10 h	
NAME				NAME				

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ITED NAME OF SIGNING OFFICER OR DIRECTOR

Law Office of Tami' A. Phillips, P.A.

1900 West Commercial Boulevard, Suite 146 Fort Lauderdale, Florida 33309 (954)229-1685 office/(954)229-1686 fax subuda@aol.com email

September 24, 2003

Division of Corporations	
PO Box 6327	
Tallahassee, FL 32314	

To Whom Ever It may Concern:

Please be advised a filing fee for the articles of amendment, a fee for a certified copy of the amendment, and a fee for a certificate of status is enclosed in the amount of \$52.50. In addition, Mr. Luder's did not receive his renewal application to remain an active corporation. Please waive any and all late fees. A check for \$150.00 in enclosed as well. Please send all certificates to the following address: PO Box 9891, Fort Lauderdale, FL 33311.

If you have any questions please do not hesitate to call. Thank you for your attention to this matter.

Sincerely yours,

Tami' A. Phillips, Esquire

For-the-Firm -

TP/tp