2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000072253

Entity Name: NEW MILENIUM SIGNS, INC.

FILED Aug 15, 2005 Secretary of State

Littly Na	ille. NEVV WILL	EINIOW SIGNS, INC.			
Current Principal Place of Business:			New Principal	New Principal Place of Business:	
9806 NW 80TH AVENUE BAY 12W HIALEAH GARDENS, FL 33016				9921 NW 80TH AVENUE UNIT 1A HIALEAH GARDENS, FL 33016	
Current N	lailing Addre	ss:	New Mailing A	New Mailing Address:	
9806 NW 80TH AVENUE BAY 12W HIALEAH GARDENS, FL 33016				9921 NW 80TH AVENUE UNIT 1A HIALEAH GARDENS, FL 33016	
FEI Number	: 76-0736242	FEI Number Applied For ()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Add	Name and Address of New Registered Agent:	
LIBERTY BUSINESS SERVICES, INC. 8202 NW 103RD STREET HIALEAH GARDENS, FL 33016 US			9921 NW 80TH	CAMPILLO, ALCIDES 9921 NW 80TH AVENUE UNIT 1A HIALEAH GARDENS, FL 33016 US	
	e named entity e of Florida.	submits this statement for the	purpose of changing its reg	gistered office or registered agent, or both,	
SIGNATURE: ALCIDES CAMPILLO Electronic Signature of Registered Agent				08/15/2005	
			gent	Date	
Election Car		(3(2)(b), F.S., the corporation did (g Trust Fund Contribution ().	·	IANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD (CAMPILLO, AL 4072 NW 65TH) Delete CIDES	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DURAN, JORG	I AVENUE UNIT 6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RUIZ, VICTOR	BRD PLACE APT 204	Title: Name: Address: City-St-Zip:	() Change () Addition	

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

SIGNATURE: ALCIDES CAMPILLO P 08/15/2005