

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000121313

Entity Name: MILLENNIUM SCIENTIFIC, INC.

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

15841 PINES BOULEVARD  
SUITE #272  
PEMBROKE PINES, FL 33027

## Current Mailing Address:

15841 PINES BOULEVARD  
SUITE #272  
PEMBROKE PINES, FL 33027

## New Principal Place of Business:

10774 NW 80TH CIRCLE  
SUITE #101  
PARKLAND, FL 33076

## New Mailing Address:

10774 NW 80TH CIRCLE  
SUITE #101  
PARKLAND, FL 33076

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHRISTIE, MICHAEL  
15841 PINES BOULEVARD  
SUITE #272  
PEMBROKE PINES, FL 33027 US

## Name and Address of New Registered Agent:

CHRISTIE, MICHAEL C DR.  
10774 NW 80TH CIRCLE  
SUITE #101  
PARKLAND, FL 33076 US

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.

SIGNATURE: MICHAEL C. CHRISTIE, PH.D.

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: CHRISTIE, MICHAEL  
Address: 15841 PINES BOULEVARD, SUITE #272  
City-St-Zip: PEMBROKE PINES, FL 33027

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: CHRISTIE, MICHAEL C DR.  
Address: 10774 NW 80TH CIRCLE, SUITE #101  
City-St-Zip: PARKLAND, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MICHAEL C. CHRISTIE, PH.D.

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date