

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063313

FILED
Apr 23, 2006
Secretary of State

Entity Name: MILLENNIUM VACATIONS INTERNATIONAL FLORIDA, INC.

Current Principal Place of Business:

301 N. CATTLEMEN RD., SUITE 203
SARASOTA, FL 34232

New Principal Place of Business:

1888 BOGGY CREEK ROAD
KISSIMMEE, FL 34744

Current Mailing Address:

301 N. CATTLEMEN RD., SUITE 203
SARASOTA, FL 34232

New Mailing Address:

1888 BOGGY CREEK ROAD
KISSIMMEE, FL 34744

FEI Number: 51-0516775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAZARUS, MARK
301 N. CATTLEMEN RD., SUITE 203
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

LAZARUS, MARK
1888 BOGGY CREEK ROAD
KISSIMMEE, FL 34744 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:

04/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAZARUS, MARK
Address: 301 N. CATTLEMEN RD., SUITE 203
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: LAZARUS, NATALIE
Address: 301 N. CATTLEMEN RD., SUITE 203
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAZARUS, MARK
Address: 1888 BOGGY CREEK ROAD
City-St-Zip: KISSIMMEE, FL 34744

Title: VD (X) Change () Addition
Name: LAZARUS, NATALIE
Address: 1888 BOGGY CREEK ROAD
City-St-Zip: KISSIMMEE, FL 34744

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: MARK LAZARUS

PD

04/23/2006

Electronic Signature of Signing Officer or Director

Date