

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000086536

FILED
Aug 18, 2008
Secretary of State

Entity Name: MILLENNIUM BOUTIQUE, CORP

Current Principal Place of Business:

529 SAMUEL ST
DAVENPORT, FL 33897

New Principal Place of Business:

Current Mailing Address:

529 SAMUEL ST
DAVENPORT, FL 33897

New Mailing Address:

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

Name and Address of Current Registered Agent:

TEJEDA, ISRAEL
421 MAYAGUEZ RD
POLK CITY, FL 33868 US

Name and Address of New Registered Agent:

FERREIRA, MARIA F
529 SAMUEL ST
DAVENPORT, FL 33897 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: MARIA F FERREIRA

08/18/2008

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: P () Delete
Name: FERREIRA, MARIA F
Address: 529 SAMUEL ST
City-St-Zip: DAVENPORT, FL 33897

Title: VP (X) Delete
Name: TEJEDA, ISRAEL
Address: 421 MAYAGUEZ RD
City-St-Zip: POLK CITY, FL 33868

Title: ES (X) Delete
Name: FERREIRA, FERNADO M
Address: 529 SAMUEL ST
City-St-Zip: DAVENPORT, FL 33897

Title: AS (X) Delete
Name: OLIVA, MARIA A
Address: 421 MAYAGUEZ RD
City-St-Zip: POLK CITY, FL 33868

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MARIA F FERREIRA

P

08/18/2008

Electronic Signature of Signing Officer or Director

Date