

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

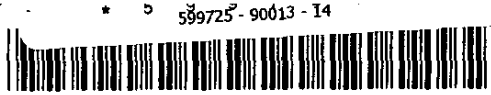
FILED
Aug 02, 1999 8:00 am
Secretary of State

08-02-1999 90013 014 ***150.00

DOCUMENT # **P95000054549**

1. Corporation Name

MILLENNIUM INTERNATIONAL, INC.



599725 - 90013 - 14

Principal Place of Business

2055 SW 122ND AVE
STE 309
MIAMI FL 33175
US

Mailing Address

2055 SW 122ND AVE
STE 309
MIAMI FL 33175
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/14/1995

4. FEI Number

65-0593303

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes



No

2. Principal Place of Business

21 **8330 NW 10 Street**

2a. Mailing Address

26 **8330 NW 10 Street**

Suite, Apt. #, etc.

22 **Building I, #3**

Suite, Apt. #, etc.

27 **Building I, #3**

City & State

23 **Miami, Florida**

City & State

28 **Miami, Florida**

Zip

24 **33126**

Country

25 **USA**

Zip

29 **33126**

Country

30 **USA**

9. Name and Address of Current Registered Agent

MALFROY, BRUNO-XAVIER
2055 SW 122 AVENUE, SUITE 304
MIAMI FL 33175

→ New →
address

10. Name and Address of New Registered Agent

81 Name

Bruno-Xavier Malfroy

82 Street Address (P.O. Box Number is Not Acceptable)

8330 NW 10 Street

83 **Building I, #3**

84 City

Miami

FL

85 Zip Code

33126

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **MALFROY, BRUNO-XAVIER**
STREET ADDRESS **2055 SW 122ND AVE., STE 309**
CITY-ST-ZIP **MIAMI FL 33175**

TITLE **VD** ☐ DELETE

NAME **VICENTE, CARMEN B**
STREET ADDRESS **2055 SW 122ND AVE., STE 309**
CITY-ST-ZIP **MIAMI FL 33175**

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME ☐ Change ☐ Addition

1.3 STREET ADDRESS ☐ Change ☐ Addition

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/27/99 (305) 559-4541

CR2E034 (5/99)

0061519

599725-10013-17
P 95000054549

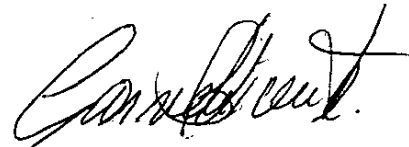
July 27, 1999

Dear Florida Department of State,

I call your office about this matter and I was instructed to write this note. I had been running my business from 2055 SW 122Av. Suite 309 for about two years. Around the same time I stopped using the P.O.Box, where your office sent the second notice, because my mail was being tampered with. I informed your office of this address change at renewal time last year, yet seems to be a problem in the recording of this information. I never received my first notice of the filing fee for my corporation and I just received the second notice after being re-routed by the post office from the POBox to my address. I notice that even in the inside of the document the suite number of the address of the register agent is incorrect, it reads 304 but it should said 309. The did not sent the filing fee because I never received the first notice, so as soon as I received this one I called and I am following their instructions, this note and a check for \$ 150.00. I thank you very much for your understanding. Please notice that since we are moving again in a few days even the address corrections written above will no longer apply. The new address is:

8330 NW 10 St. Building I, # 3 Miami, Florida 33126

We will be located in that address on **August 1, 1999** Thank you again



Carmen B. Vicente