SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000077398 (2)

MILLENNIUM TECHNOLOGICAL SOLUTIONS, INC.

2000-1 HENI SUITE 125 JACKSONVII	ce of Business DRICKS AVENUE LLE FL 32207 Place of Business t. #, etc	Mailing Address 2000-1 HENDRICKS AVENUS SUITE 125 JACKSONVILLE FL 32207 2a. Mailing Address 26 Suite, Apt #, etc. 27	JE		 Date Incorporated or Qualified 10/01/1995 FEI Number 59 - 334 965 7 Certificate of Status Desired 	3a. Date of Last Report Two. 10/95 Applied For
City & Sta	ate	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ 24	Country 25		Country 30			or intangible tax under s. 199 032 Yes No
	9. Name and Address of Current	Registered Agent	81 Na		10. Name and Address of New F	tegistered Agent
13 St J#	TEVENS, JAMES P 301 RIVERPLACE BOULEVARD UITE 2540 ACKSONVILLE FL 32207		82 Str 83 84 Cit	eet Address	s (P.O. Box Number is Not Accepta	FL 85 Zip Code
onice or	I to the provisions of Sections 607 0502 registered agent or both, in the State of am familiar with, and accept the obligation of the production of the section of the State of State o	M Florida Such change was authors of, Section 607.0505, Flori	thorized by the c	corporation's	s board of directors. I heroby acce	pt the appointment as registered
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FOOTE, GEORGE J	DELFIE	11 TITLE 1.2 NAME 1.3 STREET ADDRI	ESS	AUDITION GETTAINEES TO OFF	Change Addition
THLE NAME STREET ADDRESS CITY+ST+ZIP	D ROSEBOROUGH, DREW D 8838 YORKSHIRE COURT JACKSONVILLE FL 32257	DELETE	2 1 TITLE 2 2 NAME 2 3 STREET ADDRI 2 4 CITY - ST - 21P			Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3.1 FIFLE 3.2 NAME 3.3 STREET ACORD 3.4 CHY-SI-ZIP	E SS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DÉLETE	4 1 TITLE 4 2 NAME 4 3 STREET ADDRI 4 4 CITY - ST - ZIP			Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	5 1 TITLE 5 2 NAME 5 3 STHEFT ADDRI 5 4 CITY - ST - ZIP	ESS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-2IP	eby certify that the information supplied	DELETE	6 1 TITLE 6 2 NAME 6 3 STREET ADDRI 6 4 CITY - ST - ZIP			Change Addition

SIGNATURE:

- I NAMERA DIA KATAN AKSIK ARKIK ARKIK ARKIN BADUN JARAH DAGAN DINIA BURUN BURUN BADU DAGA