FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000091309

MILLENIUM INTERNATIONAL, INC.

Principal Place of Business		Mailing Address				h 11/100 Alleria, Ale a c			
7470 NW 68TH STREET						the man their the			
SUITE 870		SUITE 870				DO NOT WRITE IN THIS SPACE			
MIAMI FL 33166		MIAMI FL 33166				3. Date Incorporated or Qualified			
US		US				11/30/1995			
		A 44.11. Add-				4. FEI Number	Annli	ied For	
2. Principal Pla	ace of Business	2a. Mailing Address				1 ·		Applicable	
21		26				65-0625682	.75 Ad		
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.				I & Contiferts of Status Desired	ee Requ		
12		27							
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23		28							
Zip	Country	Zip	· — ·			8. This corporation owes the current year Intangible Personal Property Tax. Yes No			
24	25				Torsonar Topony Tax.				
	9. Name and Address of Curren	t Registered Agent		04	Nome	10. Name and Address of New Registered Agent			
	DATE 1400 4 14 4 4 1 1 10	•		81	Name				
	PHY, WILLIAM H JR		82 Street Add			dress (P.O. Box Number is Not Acceptable)			
	NW 68TH STREET								
SUIT	E 870			83			S411 1 2		
MIAM	II FL 33166			84	0'4	# 5 00 10 10 10 10 10 10 10 10 10 10 10 10	Zip Co	nde	
					City	FL 1°°	Zip Oc		
44 Durguant t	o the provisions of Sections 607.050	2 and 607 1508 Florida Statute	es, the a	bove-	named corpo	oration submits this statement for the purpose of changes beared of directors. I hereby accept the appointment	ing its re	egistered	
office or re	gistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was a	utnonzei	וו עסום	ne corporation	n's board of directors. I hereby accept the appointmen	t as rega	stered	
SIGNATURE									
	Signature, typed or printed name of registered ager			d Agent :	signature required	when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIF	FCTOR	S IN 12	
12.		D DIRECTORS	13.		·		hange	Addition	
TITLE	D	☐ DELETE	1.1 T			y	go		
NAME	Murphy, William H Jr		1.2 NAM						
STREET ADDRESS	7470 NW 68TH STREET 1.3		1.3 S	1.3 STREET ADDRESS					
CITY-ST-ZIP	11111 11111 1 6		1.4 C	ITY-ST-	ZIP				
TITLE	ST	☐ DELETE	2.1 T	ITLE		Пс	hange	☐ Addition	
NAME	MURPHY, JAMES J	URPHY, JAMES J		IAME	,	,			
STREET ADDRESS	7470 NW 68TH STREET		2.3 ST		ADDRESS				
1	MIAMI FL		2.40		-ZIP	•			
CITY-ST-ZIP	MINORI 1 C	☐ DELETE	3.1 TITLE				hange	☐ Addition	
	× .		321	IAME					
NAME					ADODESS			. ,	
STREET ADDRESS			3.3 STREET ADDRESS 3.4 CITY-ST-ZIP						
CITY-ST-ZIP					-ZIP		hange	Addition	
TITLE		☐ DELETE	4.1 T						
NAME				NAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS				
CITY-ST-ZIP			4.4 0	CITY-ST	ZIP			☐ A Jetton	
TITLE		☐ DELETÉ	5.1 TITLE			П	hange	☐ Addition	
NAME			5.2 N	IAME				٠.	
STREET ADDRESS			5.3 5	STREET	ADDRESS			{	
CITY-ST-ZIP			5.4 (CITY-ST	· ZIP				
TITLE		☐ DELETE	6.1 1	TTLE			Change	☐ Addition	
	•		6.2 1	NAME				\ 	
NAME	11		6.3 5	STREET	ADDRESS			.	
STREET ADDRESS	. *		6.4 CITY-ST-ZIP						
COD/ CT 7ID	•		0.4 (

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, with all other like empowered.

SIGNATURE:

FILED

Feb 13, 1999 8:00am

Secretary of State

02-13-1999 90025 018 ***150.00