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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

1999

DOCUMENT #
1. Corporation Name P96000079940

MILLENNIUM ENERGY INDUSTRIES, INC.

## FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90157 016 \*\*\*150.00



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Principal Plac	e of Business	Mailing Address						•
1305 HILL AVE		1305 HILL AVENUE						
WEST PALM BEACH FL 33407-2228		WEST PALM BEACH FL 33407-2228			DO NOT WRITE IN THIS SPACE			
	•				3. Date Incorporated or Qualifed		<del></del>	
					09/26/1996			
	lace of Business	2a. Mailing Address			4. FEI Number		<u> </u>	plied For
	TURNER QUAY	26 934 RAINER BURY			65-0696549			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		<b>\$8.75</b> / Fee Re	
22 City 8 Start		City & State			Starting Committee Cinémains			<del></del>
City & State	TEN FI	28 WITTEN FL			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23 JUI 1	Country	Zip	Counti	у	- 8. This corporation owes the curr	ent vear Inta		<del></del>
24 33		29 33458 30		jn-	Personal Property Tax.	J. 10 J. 11 11 11 11 11 11 11 11 11 11 11 11 11	Yes	□No
	9. Name and Address of Current	<del></del>			10. Name and Address of New F	registered /	Agent	
				1 Name				
	K, STEVEN		8:	2 Street Add	ress (P.O. Box Number is Not Accepta	ible)		
	5 HILL AVENUE		L	934				<u></u>
WES	ST PALM BEACH FL 33407	•	8	83 July 260				
	•		8	4 City	Tree A		85 Zip (	Code
_		·		IND	TIEL	FL	33	74 TB .
	to the provisions of Sections 07,0302 egistered agent, or both in the State or im familiar with, and accept the obligation	Florida, Such change was authons of, Section 607.0505, Florid	norized b a Statute	y the corporati	on's board of directors. I hereby accep	ot the appoir	itment as re	gistered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	egistered Ag	ent signature require		DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	PSTD	☐ DELETE	1.1 TITLE	<b>,</b>			Change	☐ Addition
NAME	HACK, STEVE R		1.2 NAME	- 1				
STREET ADDRESS	1305 HILL AVENUE			ET ADORESS				
CITY-ST-ZIP	WEST PALM BEACH FL 33407-2	228 ☐ DELETE	1.4 CITY-		<del></del>		□ Change	Addition
TITLE	V	□ DETE16	2.1 TITLE 2.2 NAME				Onungo	
NAME	HACK, GEORGE J							
STREET ADORESS	1305 HILL AVENUE	1000	1	ET ADDRESS				
CITY-ST-ZIP TITLE	WEST PALM BEACH FL 33407-2	DELETE	2.4 CITY 3.1 TITLE				Change	Addition
NAME		. · ·	3.2 NAME		· · · · · · · · · · · · · · · · · · ·		-	
STREET ADDRESS			1	ET ADDRESS				
CITY-ST-ZIP			3.4. CITY-	1				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-ZIP	]		4.4 CITY	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME		•			
STREET ADDRESS			5.3 STRE	ET ADDRESS				
CITY-ST-ZIP	·		5.4 CITY					<u> </u>
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS	• .		6.3 STRE	ET ADDRESS	•			
CITY OF 7ID	1	1	6.4 CITY	ST-ZIP				

14. I hereby certify that the information supplied with this filling 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 of the true and accurate 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 additional additional

**SIGNATURE:**