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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000001286 (8) DOCUMENT #

MILLENNIUM TREASURES, INC.

Principal Place of Business

2. Principal Place of Business 21 1455 48 4

Mailing Address

200 GREENE STREET KEY WEST FL 33040 200 GREENE STREET KEY WEST FL 33040

2a. Mailing Address

26

Applied For

Not Applicable

**FILED** 

Jan 23 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/07/1997

Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-	5. Certificate of Status Desired S8.75 Additional			
City & State		City & State		5. Set and the second Fee Required			
23 VER		City & State BE	ach, FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip 2000//	Country	8. This corporation owes or has paid the current year intangible			
24 3290		29 32-96/ 30	INCIAN KW				
	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
	SHER, KAREN A		81 Name	FISHER. KAREN A			
200 GREENE STREET				ddress (P.O Row Number is Not Acceptable)			
KEY WEST FL 33040							
83				1450 48th ANG			
			84 City 1	( 85 Zip Code			
<u> </u>			_	ERO DEACH FL 32966			
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 lightlight with, and accept the obligations of Section 507.0505; Florida Statutes.							
SIGNATURE FAILA a. John 1/16/98							
CIGNATIONE	Signature, typed or printed name of registered agent a		egistered Agent signature n	equired when reinstating) DATE			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE		☐ DELETÉ	1.1 TITLE	PRESIDENT Change Addition			
NAME			1.2 NAME	KANE FISHER			
STREET ADDRESS			1.3 STREET ADDRESS	1455 4875 AVE			
CITY-ST-ZIP	·		1.4 CITY-ST-ZIP	VERO BEACH FI 32966			
TITLE		L_ DELETE	2.1 TITLE	VILL PRES, SEOF, TRES. Change Addition			
NAME			2.2 NAME	KAREN A FIGHER			
STREET ADDRESS			2.3 STREET ADDRESS	1453 48 to AVE			
CITY - ST-ZIP			2. 4 CITY - ST - ZIP	VERE BEACH FL 32966			
TITLE		☐ DELETE	3.1 TITLE	Change  Addition			
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE	Change Addition			
NAME		•	4, 2 NAME				
STREET ADDRESS			4,3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5,1 TITLE	☐ Change ☐ Addition			
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADORESS				
CITY-ST-ZIP			5.4 CITY - ST - ZIP				
TITLE		L_] DELETE	6.1 TITLE	Change Addition			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY - ST - ZIP			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 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.