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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 4

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P9700005447 (2)

MILLENNIUM USA CORP.

FILED Mar 16 1998 8:00am Secretary of State



| 5 1 1 15 | 15 | | | | | |
|---|---|--|---------------------------------------|---|------------|--|
| i i | ce of Business | Mailing Address | | | | |
| 7081 GRAND NATIONAL DRIVE SUITE 107-A ORLANDO FL 32819 | | 7061 GRAND NATIONAL DRIVE SUITE 107-A ORLANDO FL 32619 | | DO NOT WRITE IN THIS SPACE | | |
| ONDANDO PE 32018 ONDANDO PE 32018 | | | | 3. Date Incorporated or Qualified | | |
| | | | | 01/17/1997 | ł | |
| 2. Principal P | Place of Business | 2a. Mailing Address | · · · · · · · · · · · · · · · · · · · | | lied For | |
| 21 6220 6. O.B. T. 26 6220 5. C | | | 137 | F0 040CC40 | Applicable | |
| Suite, Apt. | | Suite, Apl. #, etc. | | 5. Certificate of Status Desired \$8.75 Ad | ditional | |
| 22 /35 27 /35 | | | | 6. Certificate of Status Desired Fee Requ | | |
| City & State City & State | | | | 6. Election Campaign Financing \$5.00 M | lay Be | |
| | ANDO ITC | 28 ORCANDO, | | Trust Fund Contribution Added to | Fees | |
| Zip 3280 | Country | 7 32-809 - | Country | 8. This corporation owes or has paid the current year Intan | - | |
| 24 7200 | 25 USATE And Address of Current | Pagistered Agent | بسوروس ا | Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent | No . | |
| PI Nema | | | | | | |
| PINIO, EDECAN A RAM | | | | AMOS, JOSE L. | | |
| | | | | dress (P.O. Box Number is Not Acceptable) | | |
| SUTE 100 | | | | 201 D HARRIES AND | | |
| ORLANDO FL 32819 | | | | 5381-B HOFFNER AVE | | |
| | • | | 84 City OI | RLANDO FL 85 Zin 20 | 812 | |
| 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 acceptathe obligations of, Section 607.0505, Florida Statutes. | | | | | | |
| SIGNATURE JOSE L. RAMOS Signature, tyleod our annit gramme of registered agent and tille if applicable [NOTE: Registered Agent signature required when reinstating) | | | | uired when reinstating) DATE | | |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | IN 12 | |
| TITLE | VD | DELETE | 1.1 TITLE | | Addition | |
| NAME | JUNIOR, ARLINDO M. S | | 1.2 NAME | • • | ľ | |
| STREET ADDRESS | 7061 GRAND NATIONAL DRIV | E. #107-A | 1.3 STREET ADDRESS | 220 S. ORANGE BLOSSOM TRA | / <u> </u> | |
| CITY-ST-ZIP | ORLANDO FL 32819 | | 1,4 CITY-ST-ZIP | 1/25 Do, FC 32809 | ľ | |
| TITLE | \$TD | DELETE | 2.1 TITLE | Change | Addition | |
| NAME | SANTO, MARCO A. DE C E | | 2.2 NAME | , | | |
| STREET ADDRESS | 7061 GRAND NATIONAL DRIV | E, #107-A | 2.3 STREET ADDRESS 6 | 220 S. ORANGU BLOSSOM MAIL | - 15/70 | |
| CITY-ST-ZIP | ORLANDO FL 32819 | | 2. 4 CHTY-ST-ZIP | 120 5. CHARDO, 1=L 32605 | | |
| TITLE | | DELETE | 3.1 TITLE | (Z) Li Change | Addition | |
| NAME | | | 32 NAME | LISABUTH M. L. SANTO | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | 1220 5.0.B.T #135 | j | |
| CITY-\$T-ZIP | | | 3.4. CITY-ST-ZIP | PRLANDO, 1=C 32809. | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | 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 ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY - ST - ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | ☐ Change | Addition | |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | |
| CiTY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | | |
| 44 boroby c | الغاني المحال ويعرب ويتراك ومساهما المحاف المحاف بالغوم | this filler days and sumble to a | | Continue 110 07(2)(i) Elevide Statutes I further configuration the in | 4 | |

increase 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 informatio 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: