SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000030835

MILLENNIUM HOMES, INC.

Principal Place of Business

Mailing Address

Aug 10, 1999 8:00 am Secretary of State

08-10-1999 90015 021 ***550.00



2. Principal Place of Business 2. Sulfa, Apt. 6, etc. 2. Sulfa, Apt. 6, etc. 3. Certificate of Status Desired S.75 Additional Fee Required S.75 Additio	POMPANO BEAC		POMPANO BEACH FL 330	60						
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9. Name and Address of Current Registered Agent ROTH, RICHARD 1500 E ATLANTIC BLVD POMPANO BEACH FL 33060 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City FL 85 Zip Code 11. Pursuant to the provisions of sections 697,0502 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. Inhereby accept the appointment as registered office or registered agent, are familiar with, and accept the obligations of, section 607,0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DEEPER 1. TITLE DEEPER 2. JAME 2. JAME 2. JAME 2. JAME 2. JAME 3.1 SE 1ST TERRACE POMPANO BEACH FL 33060 DELETE 3.1 TITLE 1. STREET ADDRESS OCTYST 2/P TITLE 2. STREET ADDRESS OCTYST 2/P TITLE 3. STREET ADDRESS OCTYST 2/P T	7in	Country		Count	ry		nt vear			
10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent ROTH, RICHARD 1500 E ATLANTIC BL/D POMPANO BEACH FL 33060 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 83 84 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zi	24 33	060 25 INSA	—	30	•	· ·		Yes	☐ No	
ROTH, RICHARD 1500 E ATLANTIC BLVD POMPANO BEACH FL 33060 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City	==1.	9. Name and Address of Current F	I I	1901			egistered A	gent	_	
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes. The corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the 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, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE				8	1 Name	****				
SUD EXTRACTION POMPANO BEACH FL 33060 83	; Roth	1, RICHARD				(0.0.0	1-1			
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the abovenamed 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, and familiar with, and accept the obligations of, section 607.0508, Florida Statutes, and the state of florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, section 607.0508, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, section 607.0508, Florida Statutes, the above named corporation's submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, section 607.0508, Florida Statutes, the above named corporation's submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, section 607.0508, Florida Statutes, the above named corporation's submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, section 607.0508, Florida Statutes, the above named corporation's submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, section 607.0508, Florida Statutes, the above named corporation is submits this submits this submits this statement for the purpose of the agent a				L		Address (M.O. Box Number is not Acceptable)				
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, or both, in the State of Florida Statutes. SIGNATURE 12.	r Olvii	TANO BEACHTE COUR						TT:		
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of director's. I nereby accept the appointment as registered agent, and accept the obligations of, section 607.0505, Florida Statuties. Signature Sig										
Signature, Speed or printed range of angletand agent and table if applicable, (NOTE Registered Agent signature required when ministating) DATE	office or r	registered agent or both in the State of	Florida, Such change was	authorized	ov the corpor	rporation submits this statement for the puration's board of directors. I hereby accept	rpose of cha t the appoint	nging it iment a	s register s register	red red
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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 copyring the same legal effect as if made under oath; that I am		ertify that the information supplied with th	is filing does not qualify for			section 119.07(3)(i), Florida Statutes. I furt	her certify th	at the in	nformatio	n

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 chapted, or on an attachment with an address. **SIGNATURE:**