

# 2002 UNIFORM BUSINESS REPORT (UBR)

0007823 AV

DOCUMENT # **P97000091517**

FILED

1. Entity Name  
**NEW MILLENNIUM BUSINESS CONSULTING, INCORPORATED**

02 AUG -9 AM 8:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**725 S COUNTY RD 427  
STE 109  
LONGWOOD FL 32750  
US**

Mailing Address  
**142 SEMORAN BLVD PMB 114  
CASSELBERRY FL 32707  
US**



2. Principal Place of Business  
**109 Yorktown Place**

3. Mailing Address

~~142 Semoran Blvd, PMB 114~~

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Sanford, FL**

City & State

4. FEI Number **59-3509736** Applied For  
Not Applicable

Zip  
**32771**

Country  
**USA**

Zip

Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FARESE, ANDREA  
725 S COUNTY RD 427  
STE 109  
LONGWOOD FL 32750**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *A. Faresse Pres.*

DATE **7/23/02**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$550.00  
After September 13, 2002 Fee will be \$750.00  
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <b>FARESE, ANDREA</b> <del>725 S COUNTY RD 427 #109</del> <b>109 Yorktown Place</b> <b>LONGWOOD FL 32750</b> <b>Sanford, FL 32771</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>000007116140--0</b>
	<b>-08/14/02--01080--003</b>
	<b>****150.00 ****150.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

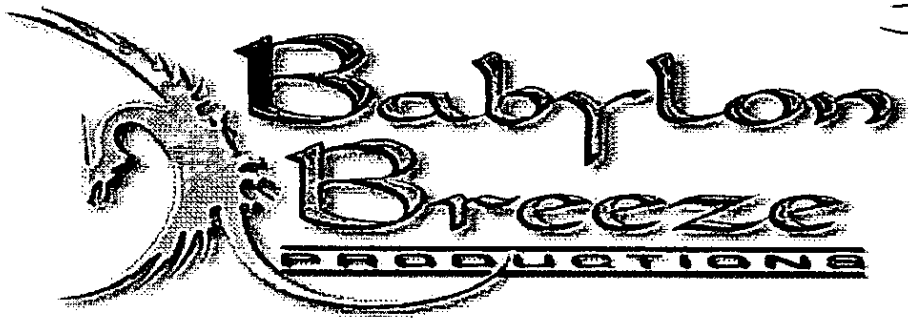
SIGNATURE: *SIGNATURE PAISSURED*

DATE **7/23/02**

CR2E034 (4/02)

*Attachment*

P97000091517



May 31, 2002

-Division of Corporations  
Uniform Business Report Filings  
P. O. Box 150  
Tallahassee, FL 32302-1500

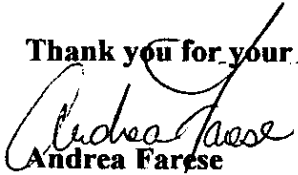
To whom it may concern:

I submitted a UBR on February 27, 2002 with my original check # 1127. On April 18, I saw that the check had not cleared my bank, and I called and had a new form faxed to me from your office and sent out a second check # 1396 on April 23.

To date, neither check has cleared. I have stopped payment on both. I was out of the country until this week when I found this form in my mail. I checked on all immediately and am trying to resolve this right away!

I am hoping you will allow me to pay the original fee, and I have sent this Certified Mail as I seem to have no luck with the Post Office. Next year, I will be paying on line or by Certified Mail so that I can have a little peace of mind.

Thank you for your consideration in advance.

  
Andrea Farese

President  
NMBC, Inc. dba Babylon Breeze Productions