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Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90008 034 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Sandra S. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000096357

1. Corporation Name

MILLENNIUM IMPORT AND EXPORT, INC.

Principal Place of Business Mailing Address
12860 SW 188TH STREET
MIAMI, FL. 33177

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		11/12/97	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0803693	
City & State		City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	25	29	30		

9. Name and Address of Current Registered Agent

BULLARD, DONALD F. SR
12860 SW 188TH STREET
MIAMI, FL. 33177

10. Name and Address of New Registered Agent

81 Name
MITZI A STUART
82 Street Address (P.O. Box Number is Not Acceptable)
3213 DOLPHIN DRIVE
83
84 City
MIRAMAR FL 85 Zip Code
33025

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	PTD	1.1 TITLE	
NAME	BULLARD, DONALD F. SR	1.2 NAME	
STREET ADDRESS	12860 SW 188TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL. 33177	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	
NAME	ROLLE, TASHA B	2.2 NAME	
STREET ADDRESS	12860 SW 188th STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL. 33177	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	MITZI A-STUART
STREET ADDRESS		3.3 STREET ADDRESS	3213 DOLPHIN DRIVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIRAMAR, FL. 33025
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 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 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: + Donald F. Bullard SR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/97)