. PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000032233

NAME

TITLE

NAME

FITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZiP

GDV-ST-DP

MILLENNIUM TECHNOLOGY SOLUTIONS, INC.

## FILED May 21, 1999 8:00 am Secretary of State

05-21-1999 90003 037 \*\*\*150.00

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Principal Place	of Business	Mailing Address							
HART NIW SIRD WAY									
PLANTATION FL 23222 5/3/NW 10/PLACE SAME MIAMI, FL 33/18						DO NOT WRITE IN THIS SPACE			
5/3/ NW 101 VEACE SAME					_  -	3. Date Incorporated or Qualifed			
MIAMI	(12 33178				1	04/08/1998			
		a. Mailing Address				4 FEI Number		<b>─</b> ──	olied For
	ce of Business	26			1	65-08293	01		Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		5.75 A	dditional quired
22		27					\$	5.00 h	May Be
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		Added to	
23		26	Country	,	-	3. This corporation owes the curre	ent year Intangib	ie	
Zip	Country	Zip [	30			Personal Property Tax.	اللكافر	es L	□No
24	25	29	30			10. Name and Address of New R	egistered Agen	<u>t</u>	
	Name and Address of Current	-							
CEBALLOS, EDGAR						(D.O. Soy Number is Not Accepta	ble)		
CEBALLOS, EDGAR  4450 HIPHIM BOAD 5/3/ NW 10   PLACE 82 Street Address (P.O. Box Number is Not Acceptable)									
CEBALLOS, EDGAR  1450 LUDI-UMA ROAD 5/3/ NW 10/ PLACE  MIAMI SPRINGS FL 33166 MIAMI, FL 33/18  82 Street Address (P.O. Box Null  83							_		
		111 - 27110		000			85	Zip C	ode
			84	1			FL		
	the provisions of Sections 607.0502	and 607 1508. Florida Statute	s, the abov	e-named o	corpora	tion submits this statement for the	purpose of chang	ging its r	egistered istered
office or reg	o the provisions of Sections 607.0502 gistered agent, or both, in the State of familiar with, and accept the obligati	if Florida. Such change was au ons of, Section 607.0505, Flori	thorized by da Statutes	the corpo	oration's	s board of directors. I hereby accep	t the appointmen		
SIGNATURE _	, -						DATE		
SIGNATURE	Ignature, typed or printed name of registered agent	and the a applicable.	Registered Age	nt signature re	equived wh	ADDITIONS/CHANGES TO OF	FICERS AND DU	RECTO	73 - 1
	OFFICERS AND		13.	1	DRE	-C1712X//		Change	Addition
TITLE	Prevident	☐ DELETE	1.2 NAME	1	1' — a .	1111111111111111111111111111111111111	/ \	•	
NAME Edga- Ceballes STREET ADDRESS 1450 Ludlan Read				TADORESS	~~/	21 NW) 101 MAC	e		
STREET ADDRESS 1850 Ludlan Klaul  CITY ST. JP 1711 ann Springs FL 33166  DELETE				7 710	MI	31 NW 101 PLAC AMI, FL 33176			
CITY-ST-ZIP	Mann Springs +	Z 33166	1.4 CITY-S 2.1 TITLE	11-21	7 77 .			Change	Addition
TITLE		CT DEFEIG	22 NAME	,	}				
NAME				TADDRESS					
STREET ADDRESS				}					
CITY+ST-ZIP		E) pricts	2.4 CITY-1	31-ZIP (	<del></del>			Change	Addition
TITLE		☐ DELETE	32 NAME	-					
-NAME -	•			T ADDRESS	-	part of		-	-
STREET ADDRESS			34 CITY :		1				
CITY-ST-ZIP		☐ DELETE	41 TITLE	31- <i>U</i> F	<del></del>			Change	Addition
TITLE		L DELETE	* 1 701.00		1				

64 CITY-ST-ZIP Thereby 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 supplied annual report is true and accurate and that my signature shall have the same legal effect as if made under outh; that I am an officer or director of the corporation or the eceiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 12 or Block 3 if changed, or un an attainment with an address, with all other like empowered.

4 2 NAME

5 1 TITLE

5.2 NAME

o 1 TITLE

62 NAME

DELETE

□ DELETE

4 3 STREET ADDRESS

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5 + CITY-ST-ZIP

44 CITY-ST-ZIP

U OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Addition i

Addition

Change

Change