PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000047576

1. Corporation Name

MILLENNIUM COATINGS, INC.

Principal Place	e of Business	Mailing Address		1 (BBINGOLUM IND IANG) (BRING BANK) DAGIN DRING DRING		1810 A111 1081		
1007 BEULAH DRIVE 1007 BEULAH DRIVE EDGEWATER FL 32132 EDGEWATER FL 32132								
					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					05/26/1998		,	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Арр	lied For	
EDGEWATER FL		26 1007 BEULAH DR		59-3 5 09886	Not	Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional			
22		27		Fee Required				
City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
23 EDGEWATER FL		28		Trust Fund Contribution Added to Fees				
Zip Couptry, 25 Volusia		Zip Country		8. This corporation owes the current year Intangible Personal Property Tax				
24 3×1.	9. Name and Address of Current I	<u> </u>	D] 		Personal Property Tax. 10. Name and Address of New Registere		IZ/NO	
	9. Name and Address of Current	zedizreiso waaur	81	Name	IV. Hame and Address of New Registers			
ACHENBACH, MYRNA								
1007 BEULAH DRIVE			82	Street Addr	ress (P.O. Box Number is Not Acceptable)			1
EDGEWATER FL 32132			83					
			84	City	F	85 Zip C	ode	
office or r agent. I a SIGNATURE	egistered agent, or both, in the State of m familiar with, and accept the obligation	ns of, Section 607.0505, Florid	a Statutes		on's board of directors. I hereby accept the app	ommern as reg		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12	į
TITLE	PRESIDENT	DELETE	1.1 TITLE			☐ Change	☐ Addition	
NAME	LIA JAME ACNE NISHOF		1.2 NAME					
STREET ADDRESS	INAT BEUKHAPA.		1.3 STREE	TADDRESS				ĺ
CITY-ST-ZIP	EDGEWATER FL. 32134		1.4 CITY-S	T-ZIP				į
TILLE	LUICE PAESIDENT	☐ DELETE	2.1 TITLE	Ì		Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS	RIIA ORANGO (C. C.	2111	2.3 STREE	TADDRESS				ı
CITY-ST-ZIP	EOGEWATER FL 3	//Ч / 	2,4 CITY-S	T-ZIP				~
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition	ĺ
NAME	,		3.2 NAME					
STREET ADDRESS	•		3.3 STREE					
CITY-ST-ZIP		□ pc: crc	3.4. CITY-5	ST-ZIP		☐ Change	Addition	!
TITLE	}	☐ DELETE	4,1 TITLE					l
NAME			4.2 NAME	1				
ATTECT LODGEOG								
STREET ADDRESS			4.3 STREE	TADORESS				
CITY-ST-ZIP		□ DELETE		1		☐ Change	☐ Addition	

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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

DELETE

☐ Change

☐ Addition

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90011 050 ***158.75