## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 26, 2002 8:00 am Secretary of State P98000048685 DOCUMENT # 1. Entity Name II MILLENIUM MAINTENANCE CORP. 02-26-2002 90103 014 \*\*\*150.00 Principal Place of Business Mailing Address 3401 S.W. 38TH ST 3401: S.W. 38TH-ST HOLLYWOOD FL 33023 HOLLYWOOD FL 33023 2. Principal Place of Business 313 ≤.ω. 3. Mailing Address 312 S.W. 5.w. 11 Suite, Apt. #, etc. · DO NOT WRITE IN THIS SPACE City & State HAILANJA/2 Applied For City & State 4. FEI Number 65-0839610 Not Applicable Country (), S.A -\$8.75 Additional 5. Certificate of Status Desired 33009 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Y enwando ORTIZ. FERNANDO Street Address (P.O. Box Number is Not Acceptable) 3401 S.W. 38TH ST HOLLYWOOD FL 33023 Zip Code 33009 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 HEGORALD DATIZ SIGNATURE ne of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 2. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE ☐ Delete TITLE ORTIZ, FERNANDO NAME NAME 3401 S.W. 38TH ST STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33023 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE ORTIZ. JORGE L NAME NAME STREET ADORESS STREET ADDRESS 3401 S.W. 38TH ST CITY-ST-ZIP HOLLYWOOD FL 33023 CITY-ST-ZIP ☐ Addition TITLE Delete - - -TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 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.

PERCENTER FERNAND DATE

FILED