

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Jan 29, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P98000075945**1. Entity Name  
MILLENNIUM3 SYSTEMS CORPORATION

## Principal Place of Business

6107-D MEMORIAL HIGHWAY

TAMPA  
33615

FL

## Mailing Address

6107-D MEMORIAL HIGHWAY

TAMPA  
33615

FL

## 2. Principal Place of Business

6107-D MEMORIAL HIGHWAY

## 3. Mailing Address

6107-D MEMORIAL HIGHWAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

## City &amp; State

TAMPA

FL

## City &amp; State

TAMPA

FL

## Zip

336154564

## Country

US

## Zip

336154564

## Country

US

## 4. FEI Number

59-3532137

## Applied For

Not Applicable

## 5. Certificate of Status Desired

☒**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

BASTIAN DAVID A  
15310 AMBERLY DRIVE  
SUITE 250  
TAMPA  
33647

FL

US

## 7. Name and Address of New Registered Agent

## 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.

## SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

01/29/2001

DATE

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 \$150.00****After MAY 1, 2001 Fee will be \$550.00****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

TITLE	S	<input type="checkbox"/> Delete
NAME	CASTRO TIFFANY L	
STREET ADDRESS	6107D MEMORIAL HWY	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	T	<input type="checkbox"/> Delete
NAME	BANDY PAULA J	
STREET ADDRESS	6107D MEMORIAL HWY	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	V	<input type="checkbox"/> Delete
NAME	CASTRO TERRY R	
STREET ADDRESS	6107D MEMORIAL HWY	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	PDC	<input type="checkbox"/> Delete
NAME	CASTRO ROBERT JR.	
STREET ADDRESS	6107-D MEMORIAL HIGHWAY	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASTRO TIFFANY L	
STREET ADDRESS	4931 STOLLS AVE.	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BANDY PAULA J	
STREET ADDRESS	6023 SAND KEY LANE	
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASTRO TERRY R	
STREET ADDRESS	4931 STOLLS AVE.	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE	PDC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CASTRO ROBERT JR.	
STREET ADDRESS	4931 STOLLS AVE.	
CITY-ST-ZIP	TAMPA FL 33615	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:** ROBERT CASTRO JR.

PDC

01/29/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)