2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000075945

Title:

Name:

Address:

City-St-Zip:

Entity Name: MILLENNIUM3 SYSTEMS CORPORATION

FILED Feb 02, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6107-D MEMORIAL HIGHWAY TAMPA, FL 336154564 US **Current Mailing Address: New Mailing Address:** 6107-D MEMORIAL HIGHWAY TAMPA, FL 336154564 US FEI Number: 59-3532137 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BASTIAN, DAVID A CASTRO, ROBERT JR. 15310 AMBERLY DRIVE 4931 STOLLS AVE TAMPA, FL 33615 SUITE 250 US TAMPA, FL 33647 US 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: ROBERT CASTRO JR. 02/02/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PDC () Delete () Change () Addition CASTRO, ROBERT JR. Name: Name: 4931 STOLLS AVE. Address: Address: City-St-Zip: TAMPA, FL 33615 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: CASTRO, TERRY R Name: 4931 STOLLS AVE. Address: Address: TAMPA, FL 33615 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BANDY, PAULA J Name: Name: 6023 SAND KEY LANE Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33543 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT CASTRO JR. PRES 02/02/2002

() Delete

CASTRO, TIFFANY L

TAMPA, FL 33615 US

4931 STOLLS AVE.

(X) Change () Addition

CASTRO, TIFFANEY L

TAMPA, FL 33615 US

4931 STOLLS AVE.