

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000000173

1. Entity Name

MILLENNIUM NATIONAL REALTOR'S, INC.



**FILED**  
**Aug 08, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90094 043 \*\*\*150.00

Principal Place of Business

7029 NORTHWEST 49TH COURT  
 FT LAUDERDALE FL 33139

Mailing Address

7029 NORTHWEST 49TH COURT  
 FT LAUDERDALE FL 33139



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0887759

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.  
 343 ALMERIA AVENUE  
 CORAL GABLES FL 33134

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)

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD VOCE, ERIC 7029 NORTHWEST 49TH COURT FT LAUDERDALE FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD WILLIAMS, CARYL J 7029 NORTHWEST 49TH COURT FT LAUDERDALE FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

*SIGNATURE REQUIRED* 8-1-2000 - 954-540-1002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

ATTACHMENT  
# P99000000173  
DW 7/3/00

MILLENNIUM NATIONAL REALTORS  
7029 North West 49 Court  
FT Lauderdale FL 33319

Date

DIVISION OF CORPORATION  
P.O. Box 1500  
Tallahassee F.L. 32314

Dear, Sir / Madam  
Document # P99000000173

Per telephone conversion with your office on July 18, 2000 pertaining to waiver of late charges.

I apologize for the delay of this payment this was sent out before and did not return to us we thought it was paid until we received the second notice this could be due to lost mail or human error.

I regret any inconvenience this delay may have caused. We will do everything we can to see to it that such a mistake doesn't happen again.

Thank you for your patience,

*Eric Voce*