2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # **P99000010321** May 23, 2000 8:00 am Secretary of State 1. Entity Name B & M MILLENNIUM INVESTMENTS, INC. 05-23-2000 90210 039 ***158.75 Principal Place of Business Mailing Address 7808 ORLEANS STREET 7808 ORLEANS STREET MIRAMAR FL 33023 MIRAMAR FL 33023-3560 2. Principal Place of Business 3. Mailing Address O. BOX 681719 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State Not Applicable MIAMI, FL 33168-1719 65-0899492 Zip Country \$8.75 Additional 囟 5. Certificate of Status Desired 33168-1719 MIAMI-DADE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAPTISTE, MARIEYOLA Street Address (P.O. Box Number is Not Acceptable) 7808 ORLEANS STREET MIRAMAR FL 33023 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Addition TITLE Change ☐ Delete TITLE BAPTISTE, MARIEYOLA - MARIEYOLA NAME NAME STREET ADDRESS 940 N.W. 135TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33168** Change ☐ Addition Delete TITLE BAPTISTE, MYTA NAME STREET ADDRESS 940 N.W. 135TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33168** Change Addition SD ☐ Delete TITLE BAPTISTE, RUTH NAME NAME STREET ADDRESS STREET ADDRESS 940 N.W. 135TH ST. CITY-ST-ZIF **MIAMI FL 33168** CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME MAREUS, KETLY NAME STREET ADDRESS STREET ADDRESS 940 N.W. 135TH ST. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33168** ☐ Delete TITLE Change ☐ Addition TITLE NAME

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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: MARIEYOLA BAPTISTE, PRESIDENT SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-7IP

STREET ADDRESS

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305-483-9480

Change

☐ Addition

Daytime Phone #