


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAY -8 AM 9:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>P99000010321</u>			
1. Corporation Name B & M MILLENNIUM INVESTMENTS, INC., a Florida Corporation			
2. Principal Office Address 7808 Orleans Street		3. Mailing Office Address same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Miramar, FL		City & State Miami, FL	
Zip 33023	Country US	Zip	Country

REINSTATEMENT 02-03

400018574794
05/08/03--01082--003 **900.00

4. Date Incorporated or Qualified To Do Business in Florida 02/02/1999	
5. FEI Number 650899492	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent			
Name MARIEYOLA BAPTISTE			
Street Address (P.O. Box Number is Not Acceptable) 7808 Orleans Street			
Suite, Apt. #, Etc.			
City Miami		State FL	Zip Code 33023

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent M. Baptiste Date 5-2-03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	MARIEYOLA BAPTISTE	940 N.W. 135th St	Miami, FL 33168
VD	MYTA BAPTISTE	940 N.W. 135th St	Miami, FL 33168
SD	RUTH BAPTISTE	940 N.W. 135th St	Miami, FL 33168

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: M. Baptiste Date 5-2-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MARIEYOLA BAPTISTE Daytime Phone #

CR2E081 (10/02)

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