

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 2000 ~~1999~~ 2000



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED May 31, 2000 8:00 am Secretary of State

05-31-2000 90024 001 ***150.00

DOCUMENT # P99000070382

1. Corporation Name

MILLENIUM SERVICE IMPORT-EXPORT, INC.

Principal Place of Business

Mailing Address

9316 COLLINS AVENUE # 29 miami beach, fl 33154

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified August 9, 1999
4. FEI Number 65-0939769
5. Certificate of Status Desired
6. Election Campaign Financing
8. This corporation owes the current year intangible Personal Property Tax.

2. Principal Place of Business

2a. Mailing Address

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Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LUCIA RUBANO 9316 Collins Avenue # 29 Miami Beach, FL 33154

81 Name
82 Street Address
83
84 City
85 Zip Code FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE Lucia Rubano 4-28-00 DATE

12. OFFICERS AND DIRECTORS
TITLE: DPS
NAME: LUCIA RUBANO
STREET ADDRESS: 9316 Collins Avenue # 29
CITY-ST-ZIP: Miami Beach, FL 33154
TITLE: VP
NAME: CARLOS A. VARGAS
STREET ADDRESS: 9316 Collins Avenue # 29
CITY-ST-ZIP: Miami Beach, FL 33154

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lucia Rubano 4-28-00 305-864-7274 DATE Daytime Phone #

CR2E034 (1/98)