

**FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** P99000082375  
 1. Entity Name  
**MILLENNIUM WORLDWIDE FUNDING & INVESTMENT GROUP INC.**



**DO NOT WRITE IN THIS SPACE**

**90150559**

2. Principal Place of Business 10381 S.W. 186 STREET	3. Mailing Address P.O. Box 940951
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State <b>MIAMI, FLORIDA</b>	City & State <b>Miami, Florida</b>	4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip <b>33194</b>	Country <b>DADW</b>	Zip <b>33194</b>	Country <b>Dade</b>

**DO NOT WRITE  
 IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Southwest Accounting**

Street Address (P.O. Box Number is Not Acceptable)

**10381 Southwest 186 Street**

City **Miami**      **FL**      Zip Code **33197**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*      DATE **06/24/2003**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE	PSD	TITLE	
NAME	LOPEZ, NOEL	NAME	
STREET ADDRESS	P.O. BOX 940906	STREET ADDRESS	
CITY - ST - ZIP	MIAMI FLORIDA 33194	CITY - ST - ZIP	
TITLE	T	TITLE	
NAME	LOPEZ, MARIA P.	NAME	
STREET ADDRESS	P.O. BOX 940906	STREET ADDRESS	
CITY - ST - ZIP	MIAMI FLORIDA 33194	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
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NAME		NAME	
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CITY - ST - ZIP		CITY - ST - ZIP	

**DO NOT WRITE  
 IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE *[Signature]*      DATE **06/24/2003**      (786)326-2428

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

CR2E034B (12/02)

attachment

**MILLENNIUM  
WORLDWIDE FUNDING  
& INVESTMENT GROUP  
INC.**

90150559  
#P990000082375

June 24, 2003

Department of State  
Division of State  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: Business Annual Report  
Millennium Worldwide Funding & Investment Group Inc.  
Document # P99000082375

To whom it may concern;

Through this letter we would like to request waiving of late filing fee on Millennium Worldwide Funding & Investment Group inc. due to the fact we did not receive the renewal form sent by your office every year as a reminder.

Your assistance in this matter would be greatly appreciated.

Respectfully,



Noel Lopez  
Millennium Worldwide Funding & Investment Group inc.