

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90132 043 ***150.00

027186 AV

DOCUMENT # P99000095365

1. Entity Name

J.C.G. MILLENNIUM, INC.

Principal Place of Business

Mailing Address

9690 NORTHWEST 25 STREET
 MIAMI FL 33172

9690 NORTHWEST 25 STREET
 MIAMI FL 33172



2. Principal Place of Business

1590 NE Miami Garden DR.

3. Mailing Address

1590 NE Miami Garden DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Nort Miami Bch.

City & State

Nort Miami Bch.

4. FEI Number

65-0967079

Applied For

Not Applicable

Zip

33179

Country

Miami-Dade

Zip

33179

Country

Miami-Dade

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANADOS, JORGE E
 9690 NW 25TH ST
 MIAMI FL 33172

7. Name and Address of New Registered Agent

Name

GRANADOS, Jorge E.

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

1590 NE Miami Garden DR.

City

Nort Miami Bch.

FL

Zip Code

33179

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

01-16-02

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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

TITLE PSTD
 NAME GRANADOS, JORGE E
 STREET ADDRESS 9690 NORTHWEST 25 STREET
 CITY-ST-ZIP MIAMI FL 33172 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
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 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD
 NAME Granados Jorge E
 STREET ADDRESS 1590 NE Miami Garden DR.
 CITY-ST-ZIP NORT MIAMI BCH. ☒ Change ☐ Addition Address

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/10/01 10:00 AM