	PLEASE READ				1	NG THIS FORM	Λ
APPLICAT	TION (FLORIDA	NDEPARTME Katherine H	NT OF STATE arris			
FOR	J. Was		Secretary of S	State		FILED LURETARY OF LURET OF CORF	STATE
REINSTATE	TVIENT	DIV	ISION OF CORPO	RATIONS		AVISION OF CORP	PORATIONS
DOCUMENT # P99000103964					00 NOV -1 PM 6:13		
Corporation Name							
MILLENNIUM	TRANSPORT SE	ERVICES,	INC.				
Principal Place of Busin	ness	Mailing Address			4 100+1001 11		8188 11118 1811E 31111 E/E1 1881
20725 NE 16TH AVENU	Е	20725 NE 16TH AVENUE					
BAY #13 NORTH MIAMI BEACH I	FL 33179	Bay #13 North Miami Beach Fl 33179					
If above addresses are	e incorrect in any way, line th	rough incorrect int	formation and enter	correction below.			
2. New Principal Office		3. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 14/00/4000		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			11/29/1999 5. FE Number 30 (1) Applied For		
City & State		City & State			65-0	<u> </u>	Not Applicable
Zip	Country	Zip	Count	ry	6. CERTIFICATE	OF STATUS DESIRED 🔀	75. Additional Fee required for a Certificate of Status
7. Names and Street A	L ddresses of Each Officer and	/or Director (Flor	ida nonprofit corpoi	ations must list at le	ast 3 directors)		
Title(s)	e(s) and/or Directors Of				ach tor City / State / Zip 4		
D TETREAL	ult, William B	20725 NE 16TH AVENUE				NORTH MIAMI BEACH	FL 33179
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						****158.7) *****10U.IU
					$\lambda Q M$	lıś	
					Bi	112	
					Ψ		
8. Name and Address of Current Registered Agent Name					Name and Address of New Registered Agent		
TETREAULT, WILLIAM B Street Address (P O: Box Number	is Not Acceptable)	
20725 NE 16TH AVENUE							-·
BAY #13 NORTH MANN REACH EL 33170							
NORTH MIAMI BEACH FL 33179						Stat F L	
10. I, being appointed	the registered agent of ha	pove named corpo	pration, am familiar	with and accept the c	obligations of Sect	ion 607.0505, F.S.	6.
Signature of Registered Agent		REGISTERED AG	ENT MUST SIGN			Date 0/08	<i>D</i> 0
	· · · · · · · · · · · · · · · · · · ·			- Al-la 11 47	manufate differ 1 1 1	ontor 607 au 647 F.O. 16. II	or partiful that when filling
this reinstatement a owed by the corpor	n officer or director or the rec application, the reason for dis ation have been paid and the s true and accurate, and my	solution has been a names of individ	eliminated, the corp luals listed on this fo	porate name satisfie: orm do not qualify for	s the requireme⊓ts r an exemption un	of section 607.0401 or 617.	0401, F.S., that all fees
	·	// /	//				
				JEN	1.1-	al.	
SIGNATURE:	SIGNATURE AND TVOED OF	ENTED NAME OF	SIGNING OFFICER OF	DIRECTOR	192	15/00 505 Date	Daytime Phone #



MILLENNIUM TRANSPORT SERVICES, INC.



20725 N.E. 16th Ave. N. Miami Beach, Fl. 33179 Phone 888-240-5222 ♦ Fax 305-770-2087

Division of Corporations
Annual Report/ Reinstatement Section

Re: Apllication,

Please note: Millennium Transport has never received any notice from your office concerning this matter, After receiving a reinstatement form from your office I contacted you on 10-17-00 and was advised to send this letter in with \$150.00 as well as \$8.75.00 for certificate of status. We spoke to your office and were told that the post office returned the original form back to you and we never received it.

If you have any questions concerning these matters please contact our office at (305) 770-0086.

Thank you, William Totreault. President