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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 170740

(5)

ATLAS TV CENTER INC

Block 12 or Block 13 if chang

FILED Feb 11 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 736 71ST ST 736 71ST ST MIAMI BCH FL 33141 MIAMI BCH FL 33141 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/11/1952 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-0681510 Not Applicable 21 26 Sulte, Apt. #, etc. Suito, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GRAUBART, DAVID 21101 NE 21 PL 82 Street Address (P.O. Box Number is Not Acceptable) N. MIAMI BEACH FL 33178 83 84 City Zip Code 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 Signature, typoid or printed name of registered agent and tale if applicable (NDTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 13. PIS DELETE PRESIDENT AND TREASURING Change Addition TITLE 1.1 TITLE GRAUDART, DAVID GRAUBART, DAVID NAME 1.2 NAME 21101 N. 21 PLACE 21101 N. 21 PLACE STREET ADDRESS 1.3 STREET ADDRESS N. MIAMI BCH, FL. N MIAMI BCH, FL 00000 CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE SECRETARY Change TITLE 21 TITLE GRAUBART, SCOTT 2.2 NAME 21101 N, 21 PLACE STREET ADDRESS 2.3 STREET ADDRESS NIMIAMI BOA, FL. 2. 4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE **6.1 THLE** NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 14. Thereby 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 of suppliemental annual poort is true and accurate and that my signature shall have the same legal effect as if made under eath; 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