

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

03-03-2002 90083 002 ***150.00

DOCUMENT # **P01000062836**

1- Entity Name
ATLANTIS PORCELAIN ART CORP.

Principal Place of Business Mailing Address
9300 SW 62ND ST 9300 SW 62ND ST
MIAMI FL 33173 MIAMI FL 33173

2. Principal Place of Business 3. Mailing Address
12415 SW 43 street 3601 SW 1st Ave.
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
MIAMI FLORIDA MIAMI FLORIDA
 Zip Country Zip Country
33175 33145

4. FEI Number Applied For
65-1123921 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent
MARTINEZ, JORGE
2948 SW 36 AVENUE
MIAMI FL 33133

7. Name and Address of New Registered Agent
 Name **JORGE MARTINEZ**
 Street Address (P.O. Box Number is Not Acceptable)
12415 SW 43 street
 City **MIAMI** FL Zip Code **33175**

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 **Jorge Martinez** DATE **02-16-02**
Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, JORGE 2948 SW 36 AVENUE MIAMI FL 33133 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JORGE MARTINEZ <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12415 SW 43 street. President MIAMI FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAIRYS VALIHO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 12415 SW 43 street Vice-President MIAMI FL 33175 + Secretary
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: **Jorge Martinez President** DATE **02-16-02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)