


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90023 044 ***150.00

DOCUMENT # P01000062836	
1. Entity Name ATLANTIS PORCELAIN ART CORP.	

Principal Place of Business 3601 SW 1ST AVE. MIAMI, FL 33145	Mailing Address 3601 SW 1ST AVE. MIAMI, FL 33145
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60015381



2. Principal Place of Business <i>4241 SW 154 CT</i>	3. Mailing Address <i>4241 SW 154 CT</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01292006 Chg-P CR2E034 (11/05)

City & State <i>MIAMI FLORIDA</i>	City & State <i>MIAMI FLORIDA</i>	4. FEI Number 65-1123921	Applied For <input type="checkbox"/> Not Applicable
Zip <i>33185</i>	Country <i>USA</i>	Zip <i>33185</i>	Country <i>USA</i>

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MARTINEZ, JORGE E 4241 SW 154 CT MIAMI, FL 33175		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	<input type="checkbox"/> Delete		TITLE	P	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MARTINEZ, JORGE			NAME	MARTINEZ, JORGE.		
STREET ADDRESS	3601 SW 1ST AVE.			STREET ADDRESS	4241 SW 154 CT		
CITY-ST-ZIP	MIAMI, FL 33145			CITY-ST-ZIP	MIAMI FL 33185.		
TITLE	V	<input type="checkbox"/> Delete		TITLE	Y	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	VALIOO, DAIRYS			NAME	VALIDO, DAIRYS		
STREET ADDRESS	3601 SW 1ST AVE.			STREET ADDRESS	4241 SW 154 CT		
CITY-ST-ZIP	MIAMI, FL 33145			CITY-ST-ZIP	MIAMI FL 33185.		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jorge Martinez *Jorge Martinez* **JORGE MARTINEZ** 01-29-06 305-682-8663

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