

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000046631 1. Entity Name ATRIUM APPRAISALS SERVICES INC	
---	---

Principal Place of Business 10714 SW 148TH COURT MIAMI, FL 33196	Mailing Address 10714 SW 148TH COURT MIAMI, FL 33196
--	--



04282006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 84-1640558	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FEBLES, MIGUEL A
 10714 SW 148TH COURT
 MIAMI, FL 33196

DO NOT WRITE IN THIS SPACE

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: *Miguel Febles* DATE: 4-28-06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

STATE OF FLORIDA
 DEPARTMENT OF REVENUE
 JUSTICE CENTER

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES FEBLES, MIGUEL A 10714 SW 148TH COURT MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FEBLES, LETICIA 10714 SW 148TH COURT MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000559013
 05/17/06-80119-016 150.00

DO NOT WRITE IN THIS SPACE

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: *Miguel Febles* DATE: 4-28-06

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