2001, UNIFORM BUSINESS REPORT (UBR) DOCUMENT # V34578 1. Entity Name ATRIUM REGISTERED AGENTS, INC. Principal Place of Business Mailing Address 1500 SAN REMO AVENUE 1500 SAN REMO AVENUE SUITE 125 CORAL GABLES FL 33146 SUITE 125 法标准 文色 CORAL GABLES FL 33146 **可证"证"是"证**"。 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

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12.

TITLE

NAME

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NAME

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MAME STREET ADDRESS

TITLE

NAME

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

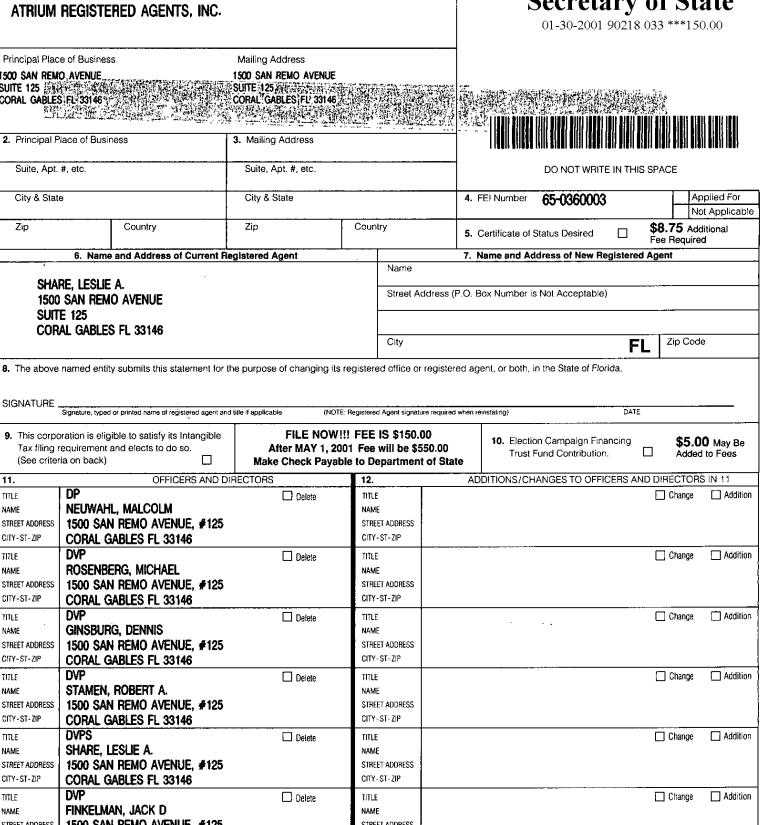
CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Name

FILED Jan 30, 2001 8:00 am Secretary of State



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.

CITY-ST-ZIP

SIGNATURE:

Zip

Country

SHARE, LESLIE A.

SUITE 125

(See criteria on back)

DP

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

CITY-ST-ZIP

1500 SAN REMO AVENUE

CORAL GABLES FL 33146

9. This corporation is eligible to satisfy its Intangible

NEUWAHL, MALCOLM

CORAL GABLES FL 33146

CORAL GABLES FL 33146

CORAL GABLES FL 33146

CORAL GABLES FL 33146

CORAL GABLES FL 33146

CORAL GABLES FL 33/46

ROSENBERG, MICHAEL

GINSBURG, DENNIS

STAMEN, ROBERT A.

SHARE, LESUE A.

FINKELMAN, JACK D

DVPS

DVP

1500 SAN REMO AVENUE. #125

1500 SAN REMO AVENUE, #125

1500 SAN REMO AVENUE. #125

1500 SAN REMO AVENUE, #125

1500 SAN REMO AVENUE, #125

1500 SAN REMO AVENUE, #125

Tax filing requirement and elects to do so.

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

THE PLES. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR