

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90064 047 ***158.75

DOCUMENT # J78698

1. Entity Name

ATLAS GUARDIANSHIP SERVICES, INC.



Principal Place of Business

1117 E HALLANDALE BEACH BLVD STE 4
N MIAMI FL ~~33162~~ 33009
US

Mailing Address

1880 NE 163 RD ST
N MIAMI FL 33162
US

*1117 E Hallandale
Suite 4
Hallandale, FL
33009*



2. Principal Place of Business - No P.O. Box #

1117 E Hallandale Blvd

Suite, Apt. #, etc.
Suite 4

City & State
Hallandale FL

Zip
33009

Country
Broward

3. Mailing Address

Suite, Apt. #, etc.
Same

City & State
Same

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 65-0007883

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ABRAMS, RONNEE
1117 E HALLANDALE BEACH BLVD STE 4
HALLANDALE FL 33009

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
ABRAMS, RONNEE
1117 E HALLANDALE BEACH BLVD STE 4
HALLANDALE FL 33009 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VS
ABRAMS ROSEANN
1117 E HALLANDALE BEACH BLVD STE 4
HALLANDALE FL 33009 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
GAVCOVICH, LOIS
1117 E HALLANDALE BEACH BLVD STE 4
HALLANDALE BEACH FL 33009 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
ROSEN, ROBERT
1117 E HALLANDALE BEACH BLVD STE 4
HALLANDALE BEACH FL 33009 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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CITY - ST - ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Robert Rosen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/07

Date

305-747 6503

Daytime Phone #