

027 515
2006 FOR PROFIT CORPORATION
ANNUAL REPORT

6/16 803 FILED 3
Mar 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 821036 - 06

1. Entity Name
ATLAS AMERICAN CORPORATION



Principal Place of Business
1111 W. 22ND STREET
1300 HIALEAH, FLORIDA
HIALEAH, FL 33010

Mailing Address
1111 W. 22ND STREET
1300 HIALEAH, FLORIDA
HIALEAH, FL 33010



02272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0812272
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GORDICH, ALAN
1111 W. 22ND STREET
HIALEAH, FL 33011

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

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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GORDICH, ALAN
STREET ADDRESS	1111 W. 22ND STREET
CITY-ST-ZIP	HIALEAH, FL
TITLE	VP
NAME	GORDICH, STEPHEN
STREET ADDRESS	1111 WEST 22ND STREET
CITY-ST-ZIP	HIALEAH, FL
TITLE	VP
NAME	ANGELLOTTI, EDWARD
STREET ADDRESS	1111 WEST 22ND STREET
CITY-ST-ZIP	HIALEAH, FL
TITLE	SEC
NAME	GORDICH, LAWRENCE
STREET ADDRESS	1111 WEST 22ND STREET
CITY-ST-ZIP	HIALEAH, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000485964
04/13/06-80016-012 450.00

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 powers reserved.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-27-06 305-885-8941