

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90098 005 ***150.00

DOCUMENT # F02000002495 1. Entity Name ATLANTIS STUDIOS CORPORATION					
Principal Place of Business 1500 62ND STREET SUITE 510 FORT LAUDERDALE, FL 33309			Mailing Address 1500 62ND STREET SUITE 510 FORT LAUDERDALE, FL 33309		
2. Principal Place of Business 2972 NW 60TH ST Suite, Apt. #, etc.		3. Mailing Address 2972 NW 60TH ST Suite, Apt. #, etc.			
City & State FT LAUDERDALE		City & State FT LAUDERDALE		4. FEI Number 23-3048623	
Zip 33309		Country Broward		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHECHTER, MARC ESQ 100 N. MILITARY TRAIL SUITE 6 DEERFIELD BEACH, FL 33442				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT ELLISON, BYRON 1500 NW 62ND STREET, SUITE 510 FORT LAUDERDALE, FL 33309	<div style="text-align: right;"><input type="checkbox"/> Delete</div> <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SCHECHTER, MARC 100 N. MILITARY TRAIL, SUITE 6 DEERFIELD BEACH, FL 33442	<div style="text-align: right;"><input type="checkbox"/> Delete</div> <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>			
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12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <u>Byron Ellison</u> Byron Ellison 4-5-05 954-351-1122 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="display: flex; justify-content: space-between; font-size: small;"> Date Daytime Phone # </div>					

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04052005 Chg-P CR2E034 (10/03)