

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 04, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000003608

1. Entity Name
ATLAS WEALTH HOLDINGS CORPORATION



Principal Place of Business
**200 SOUTH BISCAYNE BLVD., SUITE 2600
MIAMI, FL 33131**

Mailing Address
**200 SOUTH BISCAYNE BLVD., SUITE 2600
MIAMI, FL 33131**



02012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 82-0556300	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CORPDIRECT AGENTS, INC.
103 NORTH MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301**

**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

February 1, 2005

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	KALB, DANIEL
STREET ADDRESS	200 SOUTH BISCAYNE BLVD., SUITE 2600
CITY-ST-ZIP	MIAMI, FL 33131

TITLE	DP
NAME	WEISS, PAUL D
STREET ADDRESS	200 SOUTH BISCAYNE BLVD., SUITE 2600
CITY-ST-ZIP	MIAMI, FL 33131

TITLE	DS
NAME	KALB, JORGE
STREET ADDRESS	200 SOUTH BISCAYNE BLVD., SUITE 2600
CITY-ST-ZIP	MIAMI, FL 33131

TITLE	D
NAME	ALAZRAKI, CARLOS
STREET ADDRESS	200 SOUTH BISCAYNE BLVD., SUITE 2600
CITY-ST-ZIP	MIAMI, FL 33131

TITLE	D
NAME	AWASTHI, ANUPAM
STREET ADDRESS	200 SOUTH BISCAYNE BLVD., SUITE 2600
CITY-ST-ZIP	MIAMI, FL 33131

TITLE	D
NAME	CHEVALIER, SAMUEL
STREET ADDRESS	200 SOUTH BISCAYNE BLVD., SUITE 2600
CITY-ST-ZIP	MIAMI, FL 33131

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02/05/05-80024-013 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE KALB

February 1, 2005. (315)960-9991

Date

Daytime Phone #