

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90102 013 ***158.75

DOCUMENT # F96000003554

1. Corporation Name

ATLAS ENERGY SYSTEMS, INC.

Principal Place of Business

5101 NW 21ST AVE
STE 520
FT LAUDERDALE FL 33309
US

Mailing Address

2620 LEE AVENUE
EL MONTE CA 91733

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/12/1996

4. FEI Number

~~00-8073810~~ 33-0334913

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

530 Baldwin Park Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

City of Industry, CA

Zip

Country

Zip

Country

91746

9. Name and Address of Current Registered Agent

PRADO, SHAWNA R
5101 NW 21ST AVE
STE 520
FT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PCD
STREET ADDRESS BOWYER, RICHARD N
CITY-ST-ZIP 501 S MICHILLINDA
PASADENA CA

TITLE ☐ DELETE
NAME VD
STREET ADDRESS PRADO, SHAWNA R
CITY-ST-ZIP 761 SE 22ND AVE
POMPANO BCH FL 33309

TITLE ☐ DELETE
NAME VD
STREET ADDRESS BOWYER, ROYCE R
CITY-ST-ZIP 501 S MICHILLINDA AVE
PASADENA CA 91107

TITLE ☐ DELETE
NAME S
STREET ADDRESS BOWYER, JANET L
CITY-ST-ZIP 501 S MICHILLINDA
PASADENA CA

TITLE ☐ DELETE
NAME T
STREET ADDRESS CASNER, LINDA E
CITY-ST-ZIP 1425 NE 53RD CT
FT LAUDERDALE FL 33334

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

Royce R. Bowyer

Date

01/08/99

Daytime Phone #

426/855-0485

0554678

CR2E034 (11/98)