## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 18, 2001 08:00 AM DOCUMENT # F9800006046 1. Entity Name **Secretary of State** ATLAS CONTAINER COMPANY, INC. Principal Place of Business Mailing Address 1587 NW 163 STREET PO BOX 278 MIAMI FL ZELLWOOD FL 33169 32798 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 95-4707860 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NRAI SERVICES, INC. 526 E. PARK AVE. Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL32301 US 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. GERRI GIDDENS 04/18/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Addition CR2E034 (11/00) ☐ Change MAME NAME PEARLMAN ELLIOT STREET ADDRESS STREET ADDRESS 2300 W 13 STREET CITY-ST-ZIP CITY-ST-ZIP CHICAGO ☐ Delete TITLE VΡ ☐ Change NAME NAME LEE CALVIN STREET ADDRESS STREET ADDRESS 1540 S GREENWOOD AVENUE CITY-ST-ZIP CITY-ST-ZIP MONTEBELLO $\mathbf{C}\mathbf{A}$ ☐ Delete TITLE ☐ Addition BUTLER GERALD P.IR NAME STREET ADDRESS 6191 JONES AVE STREET ADDRESS CITY-ST-ZIP ZELLWOOD 32798 CITY-ST-ZIP Delete TITLE Change Change Addition HANSEN-DALINCANDRO GAYLE NAME STREET ADDRESS 2300 W. 13 STREET STREET ADDRESS CITY-ST-ZIP CHICAGO 60608 CITY-ST-ZIP TITLE VΡ Delete TITLE ☐ Change ☐ Addition SLAVIN BARRY NAME STREET ADDRESS 2300 W 13 ST STREET ADDRESS CITY-ST-ZIP CHICAGO 60608 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition PEARLMAN ELLIOT NAME STREET ADDRESS 2300 W. 13ST STREET ADDRESS CITY-ST-ZIP CHICAGO CITY-ST-ZIP 60608 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

04/18/2001

Date

Daytime Phone #

GERALD P. BUTLER, JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_