

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003865

1. Entity Name

ATLAS ENERGY SYSTEMS, INC.

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91299 025 ***158.75

Principal Place of Business
 530 BALDWIN PARK BLVD.
 CITY OF INDUSTRY CA 91746

Mailing Address
 530 BALDWIN PARK BLVD.
 CITY OF INDUSTRY CA 91746

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 95-3928496

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRADO, SHAWNA R
 5101 NW 21ST AVENUE, SUITE 520
 FT. LAUDERDALE FL 33309

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	BOWYER, RICHARD N	
STREET ADDRESS	530 BALDWIN PARK BLVD.	
CITY-ST-ZIP	CITY OF INDUSTRY CA 91746	
TITLE	DV	<input type="checkbox"/> Delete
NAME	PRADO, SHAWNA	
STREET ADDRESS	5101 NW 21ST AVENUE, SUITE 520	
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	
TITLE	VS	<input type="checkbox"/> Delete
NAME	BOWYER, JANET L	
STREET ADDRESS	530 BALDWIN PARK BLVD.	
CITY-ST-ZIP	CITY OF INDUSTRY CA 91746	
TITLE	VT	<input type="checkbox"/> Delete
NAME	CASNER, LINDA E	
STREET ADDRESS	5101 NW 21ST AVE. STE. 520	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	
TITLE	VD	<input type="checkbox"/> Delete
NAME	BOWYER, ROYCE R	
STREET ADDRESS	530 BALDWIN PARK BLVD.	
CITY-ST-ZIP	CITY OF INDUSTRY CA 91746	
TITLE	P	<input type="checkbox"/> Delete
NAME	CREIGHTON, MELVIN A	
STREET ADDRESS	530 BALDWIN PARK BLVD.	
CITY-ST-ZIP	CITY OF INDUSTRY CA 91746	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

SIGNATURE: X

ROYCE R. BOWYER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/3/01
 Date

(626) 855-0485
 Daytime Phone #

CR2E034 (10/00)