

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90003 012 ***150.00

DOCUMENT # **K81168**

1. Entity Name

DREAM USA, INC.

Principal Place of Business

**C/O ATLANTIA HOLDINGS
 910 S.E. 17TH STR., SUITE 300
 FORT LAUDERDALE FL 33316**

Mailing Address

**C/O ATLANTIA HOLDINGS
 910 S.E. 17TH STR., SUITE 300
 FORT LAUDERDALE FL 33316**

2. Principal Place of Business

3. Mailing Address

**C/o Atlantia Holdings
 645 E. Dania Beach Blvd.
 Dania Beach, FL 33004**

**C/o Atlantia Holdings
 645 E. Dania Beach Blvd.
 Dania Beach, FL 33004**



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0115844

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BLACKBURN, ACE J JR
 COONEY MATTSO LANCE BLACKBURN RICHARDS
 2312 WILTON DR.
 FORT LAUDERDALE FL 33305**

7. Name and Address of New Registered Agent

Name

Street Address

**John Watson, Esq.
 Cooney Mattson et al
 2312 Wilton Drive
 Fort Lauderdale, FL 33305**

City

State

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, 2002 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

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	BAILEY, WILLIAM A	
STREET ADDRESS	910 SE 17TH ST., 3300	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	FARRELL, JAMES B	
STREET ADDRESS	910 SE 17TH ST., #300	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12.

TITLE	P/D
NAME	A. Blackburn, Jr.
STREET ADDRESS	C/o Atlantia Holdings 645 E. Dania Beach Blvd. Dania Beach, FL 33004
CITY-ST-ZIP	
TITLE	S/D
NAME	C. Economou
STREET ADDRESS	C/o Atlantia Holdings 645 E. Dania Beach Blvd. Dania Beach, FL 33004
CITY-ST-ZIP	
TITLE	D
NAME	J. Wagner
STREET ADDRESS	C/o Atlantia Holdings 645 E. Dania Beach Blvd. Dania Beach, FL 33004
CITY-ST-ZIP	
TITLE	D
NAME	G. Morfidis
STREET ADDRESS	C/o Atlantia Holdings 645 E. Dania Beach Blvd. Dania Beach, FL 33004
CITY-ST-ZIP	
TITLE	D
NAME	R. Bartsocas
STREET ADDRESS	C/o Atlantia Holdings 645 E. Dania Beach Blvd. Dania Beach, FL 33004
CITY-ST-ZIP	

13. DIRECTORS IN 11

Change	<input checked="" type="checkbox"/> Addition
Change	<input checked="" type="checkbox"/> Addition
Change	<input checked="" type="checkbox"/> Addition
Change	<input checked="" type="checkbox"/> Addition
Change	<input checked="" type="checkbox"/> Addition
Change	<input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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:

NOT REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles A. Economou

2-13-02

Date Daytime Phone #