2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2003
Secretary of State

DOCUMENT# L02000019749

Entity Name: ATLANTIC INVESTORS LLC

Current Principal Place of Business:

741 W. COUNTRY CLUB CIR.
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

741 W. COUNTRY CLUB CIR.
PLANTATION, FL 33317

New Mailing Address:

6919 W. BROWARD BLVD.
#277
PLANTATION, FL 33317

FEI Number: 38-3660929 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, DANIEL E
741 W. COUNTRY CLUB CIR.
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title:	MGRM	( ) Delete
Name:	PEREZ, DANIEL E	
Address:	741 W. COUNTRY CLUB CIR.	
City-St-Zip:	PLANTATION, FL 33317	
Title:	MGRM	( ) Delete
Name:	WATERS-METOYER, DARCEL	
Address:	16238 SW 15TH STREET	
City-St-Zip:	PEMBROKE PINES, FL 33027	
Title:	MGRM	( ) Delete
Name:	METOYER, DERRICK	
Address:	16238 SW 15TH STREET	
City-St-Zip:	PEMBROKE PINES, FL 33027	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DERRICK J METOYER MGRM 05/06/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date