

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90585 027 ****50.00

DOCUMENT # L02000032635

1. Entity Name

ATLANTIS PROPERTIES LLC



DO NOT WRITE IN THIS SPACE

30067172

2. Principal Place of Business
3911 NE 22nd Avenue

3. Mailing Address
P.O. Box 21692

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

4. FEI Number
54-2099223

Applied For
Not Applicable

Zip
33308

Country
USA

Zip
33335

Country
USA

5. Certificate of Status Desired \$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Michael F. Rizzo

Street Address (P.O. Box Number is Not Acceptable)
3911 NE 22nd Avenue

City Ft. Lauderdale, FL Zip Code 33308

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Michael F. Rizzo* Michael F. Rizzo (President)

3/28/03
DATE

FEE IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Michael R. Rizzo 3911 NE 22nd Avenue Ft. Lauderdale, FL 33308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE PRESIDENT ELY BENAIM 3911 NE 22nd Avenue Ft. Lauderdale, FL 33308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY VIVIAN BENAIM 980 Collins Avenue Apt 8X Bal Harbour, FL 33154
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**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my 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: *Michael F. Rizzo* Michael F. Rizzo 3/28/03 (954) 258-2051

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/02)