

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2007 8:00 am
Secretary of State

01-26-2007 90036 039 ***150.00

DOCUMENT # P05000044724

1. Entity Name
ATNESS CAPITAL CORPORATION



Principal Place of Business

80 S.W. 8TH ST.
SUITE 2000 UNIT 68
MIAMI, FL 33130

Mailing Address

80 S.W. 8TH ST.
SUITE 2000 UNIT 68
MIAMI, FL 33130

60007586



2. Principal Place of Business - No P.O. Box #
1395 Brickell Ave.

3. Mailing Address
1395 Brickell Ave.

Suite, Apt. #, etc.
Suite 720

Suite, Apt. #, etc.
Suite 720

01052007 Chg-P CR2E034 (12/06)

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number
42-1663901

Applied For
Not Applicable

Zip
33131

Country
USA

Zip
33131

Country
USA

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

ADWAR, RENEE ESQ
848 BRICKELL AVE STE 830
MIAMI, FL 33131

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME CATHARINO DEOLIVERIA, VICTOR HUGO V
STREET ADDRESS 80 SW 8 ST STE 2000 UNIT 68
CITY-ST-ZIP MIAMI, FL 33130

TITLE VP ☐ Delete
NAME CATHARINO DEOLIVERIA, JOSE RICARDO
STREET ADDRESS 80 SW 8 ST STE 2000 UNIT 68
CITY-ST-ZIP MIAMI, FL 33130

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME Catharino de Oliveira, Victor Hugo
STREET ADDRESS 1395 Brickell Ave., Suite 720
CITY-ST-ZIP Miami, Florida 33131

TITLE VP ☒ Change ☐ Addition
NAME Catharino de Oliveira, Jose Ricardo
STREET ADDRESS 1395 Brickell Ave., Suite 720
CITY-ST-ZIP Miami, Florida 33131

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jose R. Catharino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/19/2007 (305)374-4422