

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000149224

Entity Name: ATRIUM CENTRE, INC.

FILED
Jul 03, 2006
Secretary of State

Current Principal Place of Business:

5301 N. FEDERAL HIGHWAY
SUITE 190
BOCA RATON, FL 33487

New Principal Place of Business:

5301 N. FEDERAL HIGHWAY
SUITE 150
BOCA RATON, FL 33487

Current Mailing Address:

5301 N. FEDERAL HIGHWAY
SUITE 190
BOCA RATON, FL 33487

New Mailing Address:

5301 N. FEDERAL HIGHWAY
SUITE 150
BOCA RATON, FL 33487

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEHMAN, JONATHAN H
5301 N. FEDERAL HIGHWAY
SUITE 190
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

LEHMAN, JONATHAN H
5301 N. FEDERAL HIGHWAY
SUITE 150
BOCA RATON, FL 33487 US

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:

07/03/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEHMAN, JERRY
Address: 5301 N. FEDERAL HIGHWAY, SUITE 190
City-St-Zip: BOCA RATON, FL 33487

Title: VP () Delete
Name: STRAUSS, KENNETH J
Address: 515 EAST LAS OLAS BLVD., 15TH FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VP () Delete
Name: VEGSO, PETER
Address: 3608 CARLTON PLACE
City-St-Zip: BOCA RATON, FL 33496

Title: VP () Delete
Name: PERLOW, JEFFREY M
Address: 18901 NE 29TH AVE. SUITE 100
City-St-Zip: AVENTURA, FL 33180

Title: VP () Delete
Name: MARCUS, KRYSTAL
Address: 18901 NE 29TH AVE. SUITE 101
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEHMAN, JERRY
Address: 5301 N. FEDERAL HIGHWAY, SUITE 150
City-St-Zip: BOCA RATON, FL 33487

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

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 Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JONATHAN H LEHMAN

RA

07/03/2006

Electronic Signature of Signing Officer or Director

Date