

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000149224

Entity Name: ATRIUM CENTRE, INC.

FILED  
Jan 24, 2007  
Secretary of State

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

FEI Number: 90-0247249

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEHMAN, JERRY  
Address: 5301 N. FEDERAL HIGHWAY, SUITE 150  
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: ( ) 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:

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 LEHMAN

MGR

01/24/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date