

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000038661

Entity Name: ATLAS OPERATIONS, INC.

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

325 SW 15 AVENUE
POMPAN0 BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

325 SW 15 AVENUE
POMPAN0 BEACH, FL 33069

New Mailing Address:

FEI Number: 65-0493451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNI, GUSTAVO
325 SW 15 AVENUE
POMPAN0 BEACH, FL 33069 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: PD () Delete
Name: BARNI, GUSTAVO
Address: 11157 N.W. 68 PLACE
City-St-Zip: PARKLAND, FL 33076

Title: TSD () Delete
Name: BARNI, MELANI
Address: 11157 N.W. 68 PLACE
City-St-Zip: PARKLAND, FL 33076

Title: VP () Delete
Name: LEITMAN, LORN
Address: 791 CRADON BLVD #907
City-St-Zip: KEY BISCAVNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARNI, GUSTAVO
Address: 6143 N.W. 91 AVENUE
City-St-Zip: PARKLAND, FL 33067

Title: TSD (X) Change () Addition
Name: BARNI, MELANI
Address: 6143 N.W. 91 AVENUE
City-St-Zip: PARKLAND, FL 33067

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 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: MELANI BARNI

TSD

04/19/2005

Electronic Signature of Signing Officer or Director

Date