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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000072858

1. Corporation Name
ATLANTIC REALTY, INC.

Principal Place of Business: 26 WESTWARD DR MIAMI SPRINGS FL 33166 US
Mailing Address: 26 WESTWARD DR MIAMI SPRINGS FL 33166 US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/04/1994
4. FEI Number: 65-0534410
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes/No

21. Principal Place of Business
22. Suite, Apt. #, etc.
23. City & State
24. Zip Country
25. Country
26a. Mailing Address
27. Suite, Apt. #, etc.
28. City & State
29. Zip Country
30. Country

9. Name and Address of Current Registered Agent
PERLSTEIN, ARNOLD ESQ.
4801 S. UNIVERSITY 2ND FL
FT. LAUDERDALE FL 33328

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE PSD ALWEISS, IRA
NAME ALWEISS, IRA
STREET ADDRESS 26 WESTWARD DR
CITY-ST-ZIP MIAMI SPRINGS FL 33166
TITLE AS PERLSTEIN, ARNOLD
NAME PERLSTEIN, ARNOLD
STREET ADDRESS 4801 S. UNIVERSITY DR 2ND FLOOR
CITY-ST-ZIP FT. LAUDERDALE FL 33328

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PSD
1.2 NAME ALAN L. ALWEISS
1.3 STREET ADDRESS 26 WESTWARD DR
1.4 CITY-ST-ZIP MIAMI SPRINGS, FLA. 33166

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Alan L. Alweiss* 2-10-99 305-884-8440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/98)