FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT . CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT 1. Corporation Name	#P94000081740(0)
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97 JUN 23 AM 7: 28

SECRETARY OF STATE TALLAHASSEE FLORIDA

Atlas International	Developers, I	Inc.				
Principal Place of Business	Mailing Address			 		
•	10426 NW 5	1.4.01				
10426 NW 51st St.	• • • • • • • • • • • • • • • • • • • •					
Coral Springs, FL 33076	ral Springs, FL 33076 Coral Springs, FL 33076			3. Date Incorporated or Qualified	3a. Date of Last Report 5///96	
2. Principal Place of Business	28. Mailing Address			4. FLI Number	Applied Fo	or
21	26			65-0533795	Not Applic	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Addition	
22	27			5. Certificate of Status Desired	Fee Required	
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be	e
23	28			Trust Fund Contribution	Added to Fees	
Zip Country	Zip	Countr	У	8. This corporation has liability for in		32,
24 25 9. Name and Address of Current		30		Florida Statutes 10. Name and Address of New Reg	Yes No	
	nogratored Agont	81	Name	To: Haile and Address of New Heg	hereien Wäsiit	-+
Igal Atlas						
10426 N.W. 51st St		82	Stréet Ad	ldress (P.O. Box Number is Not Acceptabl	e)	
		83	;			\dashv
Coral Springs, FL	33076					
7 3 7		84	City		FL 85 Zip Code	
Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligations.	and 607.1508, Florida Statute i Florida. Such change was ai ons of, Section 607.0505, Flor	s, the abovulhorized brida Statute	re-named co y the corpo is.	orporation submits this statement for the praction's board of directors. I hereby accep	urpose of changing its registe	ered red
Signature: typed or printed name of registered agent	and title if applicable (NOTE	Registered Ag	ent signature re	quired when reinstating)	DATE	
12. OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12	<u></u> [
TITLE P	DELETE	1.1 TITLE		P	Change Add	ddition
NAME Atlas, Igal		1.2 NAME		Atlas, Igal		
STREET ADDRESS 10426 NW 51 St. FL CITY-ST-ZIP Coral Springs, FL	. .	1.3 STREE	t address /	0426 NW 51 St.	- الر وساد	
	33076	1.4 CITY-	ST-ZIP 1	Coral Springs, FL 33	0 76	
TITLE V/T/S	☐ DELETE	2 1 TITLE			Change Add	idition
NAME Atlas. Susan W.		2.2 NAME				ĺ
STREET ADDRESS 10426 NW 51 St		2.3 STREE	T ADDRESS			
STREET ADDRESS 10429 NW SIST COTAL Springs, FL	330/6	2. 4 CHY-	ST - 7/P	200002:	221942==	<u>-0</u>
ince	DELETE	3 1 TITLE			221 <u>94</u> 2 79701900001	
NAME		3.2 NAME		· · · · · · · · · · · · · · · · · · ·	65.00 ****165.	.00
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NAME ONESE ADDRESS			ADDRESS			ĺ
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CITY - \$1 - ZIP	DELETE	4.4 CITY - 5.1 THLE	21-214		Change Add	idition
NAME		52 NAME			C change C Acc	.5111011
STREET ALDRESS			I ADDRESS			
CITY-ST-Z		54 Cily-				
TITLE	DELETE	61 TITLE			Change Add	Idition
NAME	:	6.2 NAME	ļ			
STREET ADDRESS			ADDRESS			-
CITY-ST-ZIP		6 4 CITY-				

14. I do 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 of lam 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.

Susan W. Atlas

Dear Siro:

I never received the pre-printed first notice this year.

Thank you.

Sincerely, Sugan N. atta