

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P95000043110**
Entity Name **ATI HEAT TREAT CORPORATION**

FILED
SECRETARY OF STATE
01 MAY 23 AM 10:27

Principal Place of Business
**3000 TAFT ST
HOLLYWOOD FL 33021**

Mailing Address
**3000 TAFT ST
HOLLYWOOD FL 33021**

Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number **65-0607386**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MENDELSON, VICTOR H.
3000 TAFT ST
HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City **FL** Zip Code _____

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

OFFICERS AND DIRECTORS		
NAME	STREET ADDRESS	CITY-ST-ZIP
P MOSKWA, William F	3000 TAFT ST	HOLLYWOOD FL 33021
☒ Delete		
BT IRWIN, THOMAS S.	3000 TAFT ST	HOLLYWOOD FL 33021
☐ Delete		
CONTROLLER NICHOLAS, MICHAEL	3000 TAFT ST	HOLLYWOOD FL 33021
☒ Delete		
S LETENAR, ELIZABETH R.	3000 TAFT ST	HOLLYWOOD FL 33021
☒ Delete		
AS VETTER, JUDITH	3000 TAFT ST	HOLLYWOOD FL 33021
☒ Delete		
☐ Delete		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS
		CITY-ST-ZIP
		☐ Change ☐ Addition
		☒ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Thomas S. Irwin** Date: **4/30/01** Daytime Phone #: **954-744-7560**

CR2E034 (11/00)