

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000050124 (3)

1. Corporation Name

ATLANTIS CAPITAL MANAGEMENT, INC.



Principal Place of Business

2977 MCFARLAND ROAD
PENTHOUSE 5
MIAMI FL 33133

Mailing Address

2977 MCFARLAND ROAD
PENTHOUSE 5
MIAMI FL 33133

2. Principal Place of Business

21 1541 BRICKELL AVENUE

State Apt. #, etc.

22 SUITE 3804

City & State

23 MIAMI, FLORIDA

Zip

24 33129

Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

2a. Mailing Address

26 1541 BRICKELL AVENUE

State Apt. #, etc.

27 SUITE 3804

City & State

28 MIAMI, FLORIDA

Zip

29 33129

Country

3. Date Incorporated or Qualified

06/27/1995

3a. Date of Last Report

N/A.

4. FEI Number

65-0616234

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes.

Yes No

10. Name and Address of New Registered Agent

81 Name WISSAM K. ABDELNOUR

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

1541 BRICKELL AVENUE

83 APT. 3804

84 City MIAMI

FL 85 Zip Code

33129

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0606, Florida Statutes.

SIGNATURE

WISSAM K. ABDELNOUR.

4/26/96.

12. OFFICERS AND DIRECTORS

1. Title

D

NAME
ABDELNOUR, WISSAM K
STREET ADDRESS
2977 MCFARLAND ROAD, PENTHOUSE 5
CITY, ST, ZIP
MIAMI FL 33133

2. Title

NAME

STREET ADDRESS

CITY, ST, ZIP

3. Title

NAME

STREET ADDRESS

CITY, ST, ZIP

4. Title

NAME

STREET ADDRESS

CITY, ST, ZIP

5. Title

NAME

STREET ADDRESS

CITY, ST, ZIP

6. Title

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STREET ADDRESS

CITY, ST, ZIP

7. Title

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CITY, ST, ZIP

8. Title

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CITY, ST, ZIP

9. Title

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CITY, ST, ZIP

10. Title

NAME

STREET ADDRESS

CITY, ST, ZIP

11. Title

NAME

STREET ADDRESS

CITY, ST, ZIP

12. Title

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. Title

2. Name

3. Street Address

4. City, St, Zip

5. Title

6. Name

7. Street Address

8. City, St, Zip

9. Title

10. Name

11. Street Address

12. City, St, Zip

13. Title

14. Name

15. Street Address

16. City, St, Zip

17. Title

18. Name

19. Street Address

20. City, St, Zip

21. Title

22. Name

23. Street Address

24. City, St, Zip

25. Title

26. Name

27. Street Address

28. City, St, Zip

29. Title

30. Name

31. Street Address

32. City, St, Zip

33. Title

34. Name

35. Street Address

36. City, St, Zip

37. Title

38. Name

39. Street Address

40. City, St, Zip

41. Title

42. Name

43. Street Address

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69. Title

70. Name

71. Street Address

72. City, St, Zip

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78. Name

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80. City, St, Zip

81. Title

82. Name

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84. City, St, Zip

85. Title

86. Name

87. Street Address

88. City, St, Zip

89. Title

90. Name

91. Street Address

92. City, St, Zip

93. Title

94. Name

95. Street Address

96. City, St, Zip

97. Title

98. Name

99. Street Address

100. City, St, Zip

SIGNATURE:

WISSAM K. ABDELNOUR.

4/26/96. (305) 858-7135.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)