


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

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Jan 22 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000062469 (8)

1. Corporation Name
ATLANTIS FUNDING CONCEPTS, INC.



Principal Place of Business 6435 EASTPOINTE PINES STREET PALM BEACH GARDENS FL 33418	Mailing Address POST OFFICE BOX 32994 PALM BEACH GARDENS FL 33420-2994
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3. Date Incorporated or Qualified 08/11/1995	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21 2421 CARDINAL LANE Suite, Apt. #, etc. 22 City & State 23 PALM BEACH GARDENS, FL 33418 Zip 24 33410 Country 25 USA	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	4. FEI Number 65-0599097	Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent CHRISTIAN, RICHARD F 6435 EASTPOINTE PINES STREET PALM BEACH GARDENS FL 33418	10. Name and Address of New Registered Agent 81 Name RICHARD F. CHRISTIAN 82 Street Address (P.O. Box Number is Not Acceptable) 2421 CARDINAL LANE 83 84 PALM BEACH GARDENS FL 33410 85 Zip Code
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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 1/4/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	CHRITIAN, RICHARD F	1.2 NAME	CHRISTIAN, RICHARD F.
STREET ADDRESS	6435 EASTPOINTE PINES STREET	1.3 STREET ADDRESS	2421 CARDINAL LANE
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	1.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	VP	2.1 TITLE	VP
NAME	JONES, PAULA M	2.2 NAME	JONES, PAULA M.
STREET ADDRESS	6435 EASTPOINTE PINES STREET	2.3 STREET ADDRESS	2421 CARDINAL LANE
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	2.4 CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE:  DATE 1/6/97

CR2E034 (9/96)