

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 12, 1999 8:00 am
Secretary of State

05-12-1999 90003 049 ***150.00

DOCUMENT # P96000030414

1. Corporation Name

ATLANTIS MORTGAGE CORPORATION ✓

Principal Place of Business

Mailing Address

1515 Washington Street
Hollywood, FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/96

4. FEI Number

65-0659339

Applied For

Not Applicable

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

2. Principal Place of Business

1340 NW 111 Way

Suite, Apt. #, etc.

City & State

Coral Springs, FL 33071

Zip

Country

33071 25 USA

2a. Mailing Address

1340 NW 111 Way

Suite, Apt. #, etc.

City & State

Coral Springs, FL 33071

Zip

Country

33071 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Emerman, Phillip J.
1515 Washington Street
Hollywood, FL 33020

81 Name

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

1340 NW 111 Way

83

84 City

Coral Springs

FL

85 Zip Code

33071

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 *Phillip J. Emerman*
Signature, typed or printed name of registered agent and title if applicable

Phillip J. Emerman

(NOTE: Registered Agent signature required when reinstating)

DATE

4/23/99
4/23/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PVSTD	<input type="checkbox"/> DELETE
NAME	EMERMAN, PHILLIP J.	
STREET ADDRESS	1515 Washington St.	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	1340 NW 111 Way
1.4 CITY-ST-ZIP	Coral Springs, FL 33071
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *Phillip J. Emerman*

Phillip J. Emerman 4/23/99 (954)340-3633

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/23/99 Daytime Phone #

CR2E034 (1/198)