

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

FILED

**Apr 21 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
----------------------------------------------------	-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

DOCUMENT # P96000101864 (2)
1. Corporation Name
ATLAS HOLDING CORPORATION



Principal Place of Business 9820 SHERIDAN STREET #203 PEMBROKE PINES FL 33024	Mailing Address 9820 SHERIDAN STREET #203 PEMBROKE PINES FL 33024
---------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4956-19 Le Chalet Blvd Suite, Apt. #, etc. 22 103 City & State 23 Boynton Beach, FL Zip 24 33437		2a. Mailing Address 26 4956-19 Le Chalet Blvd Suite, Apt. #, etc. 27 103 City & State 28 Boynton Beach, FL Zip 29 33437		3. Date Incorporated or Qualified 01/01/1997	
4. FEI Number 65-0725899		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**MARCHETTA, RICHARD E
9820 SHERIDAN STREET #203
PEMBROKE PINES FL 33024**

10. Name and Address of New Registered Agent
81 Name **MARChetta, Richard E.**
82 Street Address (P.O. Box Number is Not Acceptable)
5100 ROSEN BLVD.
83
84 City **Boynton Beach** FL 85 Zip Code **33437**

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 **Richard E. Marchetta, President** *Richard E. Marchetta* **4/15/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature Required when reinstating) DAY

12. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> DELETE
NAME	MARCHETTA, RICHARD E	
STREET ADDRESS	9820 SHERIDAN STREET #203	
CITY-ST-ZIP	PEMBROKE PINES FL 33024	
TITLE	CEO	<input type="checkbox"/> DELETE
NAME	MARCHETTA, RICHARD E	
STREET ADDRESS	9820 SHERIDAN STREET #203	
CITY-ST-ZIP	PEMBROKE PINES FL 33024	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	5100 ROSEN BLVD.
1.4 CITY-ST-ZIP	Boynton Beach, FL 33437
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	5100 ROSEN BLVD
2.4 CITY-ST-ZIP	Boynton Beach, FL 33437
3.1 TITLE	<input 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.
SIGNATURE **Richard E. Marchetta, Pres.** *Richard E. Marchetta* **4/15/98** **854-685-4036**

CR2E034 (10/97)