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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000019841 (0)

ATLAS CONSULTING SERVICES, INC.

Principal Place of Business

1550 SEABREEZE BOULEVARD, SUITE 211

Mailing Address

1550 SEABREEZE BOULEVARD, SUITE 211

## **FILED** Jan 26 1998 8:00am Secretary of State

3. Date incorporated or Qualified 03/04/1997  2. Principal Place of Business 22. Mailing Address 23. Mailing Address 24. FEI Number 25. Certificate of Status Desired 27. City & State 28. City & State 39. Date incorporated or Qualified 03/04/1997  4. FEI Number 6. FINATE 6. Election Campaign Financing 6. Elect	FORT LAUDERDALE FL 33316	FORT LAUDERDALE FL 3331	6	
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. A FEI Number 4. FEI Number 5. Applied For 2. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 4. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE
2. Principal Place of Business   2a. Mailing Address   27 STR. etc.   28 L2.4.6 S.E.   7 STR. etc.   28 L2.4.6 S.E.   7 STR. etc.   28 Suite, Apt. 4, etc.   27 Suite, Apt. 4, etc.   28 St. 4 St. 4 Suite, Apt. 4, etc.   27 Suite, Apt. 4, etc.   28 St. 4 St. 4 Suite, Apt. 4, etc.   28 St. 4 St.				
Mol Applicable   Suite, Apt. 8, etc.   Sui	2. Principal Place of Business	2a. Mailing Address	· · · · · ·	4. FEI Number Applied For
Suite, Apt. 8, etc.    Suite, Apt. 8, etc.	212246 SE 17 STE	20 2246 SE /	TOTOPOT	65-05/9085 Not Applicable
City & State 23   F. LANDERDALE FL   28   F. LANDERDALE FL   33   48		Suite, Apt. #, etc.		\$8.75 Additional
City & State 23	22	27		
T. LAUDER DALE FL   28	City & State	City & State	·	6. Election Campaign Financing \$5.00 May Be
Zip	23 FT. LAUDERDALE FL	28 FT. LAUDER	PALE FL	,
9. Name and Address of Current Registered Agent  AMERILAWYER CHARTERED  343 ALMERIA AVENUE  CORAL GABLES FL 33134  82 Street Address (F.O. Box Number is Not Acceptable)  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 Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the applications of Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  11. TITLE  PSTD  ALIEV, BULENT Y  ALIEV BULENT	Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134  82 Street Address (P.O. Box Number is Not Acceptable)  83 BB			1157	
ASIA ALMERIA AVENUE CORAL GABLES FL 33134  82 Street Address (P.O. Box Number is Not Acceptable)  83		Registered Agent	<del>-  </del>	10. Name and Address of New Registered Agent
CORAL GABLES FL 33134    83	1		81 Name	The state of the s
B3   B4   City   FL   B5   Zip Code			82 Street Addres	ss (P.O. Box Number is Not Acceptable)
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. Thereby accept the appointment as registered agent, and the state of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and the state of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent agent, and the state of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and the state of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, and the purpose of changing its registered agent agent, and the purpose of change appointment as registered agent, and the purpose of circumstance and the purpose of circumstance agent, and the purpose of circumstance agent	CORAL GABLES FL 33134			
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 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, and accept the obligations of, Section 607.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. TILE  NAME  ALIEV, BULENT Y  1550 SEABREEZE BOULEVARD, SUITE 211  TILE  DELETE  1.1 TILE  1.2 NAME  1.3 STREET ADDRESS  CITY-ST-ZIP  DELETE  2.1 TILE  1.3 STREET ADDRESS  CITY-ST-ZIP  DELETE  2.1 TILE  Change  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  3.1 TILE  Change  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  3.1 STREET ADDRESS  CITY-ST-ZIP  Change  Addition  AMAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  3.1 STREET ADDRESS  CITY-ST-ZIP  Change  Addition  Addition  NAME  STREET ADDRESS  CITY-ST-ZIP  Change  Addition  AMAME  STREET ADDRESS  CITY-ST-ZIP  ALIEV, ST-ZIP  Change  Addition  Addition  AMAME  STREET ADDRESS  CITY-ST-ZIP  ALIEV, ST-ZIP  Change  Addition  AMAME  STREET ADDRESS  CITY-ST-ZIP  ALIEV, ST-ZIP  Change  Addition  AMAME  STREET ADDRESS  CITY-ST-ZIP  ALIEV, ST-ZIP  ALIEV, ST-ZIP  Change  Addition  AMAME  STREET ADDRESS  CITY-ST-ZIP  ALIEV, ST-ZIP  ALIEV, ST	Į		83	The state of the s
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submitts 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 obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIG			84 City	85 Zip Code
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 agent with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Si	11 Pursuant to the provisions of Sections 607.0502	and 607 1508. Florida Statutes, I	the above-named como	
SIGNATURE  STRET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	office or registered agent, or both, in the State of	Florida. Such change was auth	orized by the corporatio	on's board of directors. I hereby accept the appointment as registered
Change   Addition	1 10 // 1 /			15 70: 98
TILE PSTD DELETE DELETE 1.1 TITLE  ALIEV, BULENT Y  STREET ADDRESS 1.2 SEABREEZE BOULEVARD, SUITE 211  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  1.1 TITLE  1.2 NAME  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  DELETE  2.1 TITLE  1.3 STREET ADDRESS  2.772.3 C.R.O.M.W.E.L.C.; R.  1.4 CITY-ST-ZIP  1.5 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  3.2 NAME  3.2 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  Addition  Addition  Addition  Addition  Change Addition  Addition  Addition  Addition  Addition  Addition  Change Addition  Addition  Change Addition	SIGNATURE Storied or printed parts of registered agent a	and differ apolicable (NOTE: Re	colstered Agent signature required	d when reinstating) DATE
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NAME	CITY-ST-ZIP FORT LAUDERDALE FL 33316		1.4 CITY-ST-ZIP BO	CARATON FL 33486
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officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, 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.