

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 19, 1999 8:00 am
Secretary of State

07-19-1999 90010 029 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # P97000019841

1. Corporation Name

ATLAS CONSULTING SERVICES, INC.



Principal Place of Business

Mailing Address

**309 HENDRICKS ISLE
#3
FORT LAUDERDALE FL 33301
US**

**309 HENDRICKS ISLE
#3
FORT LAUDERDALE FL 33301
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/04/1997

4. FEI Number

65-0519085

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. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt., #, etc.

26 Suite, Apt., #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

25 Country

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

81 Name

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

83

84 City

FL

85

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ DELETE

NAME **ALIEV, BULENT Y**

STREET ADDRESS **21723 CROMWELL CIRCLE**

CITY-ST-ZIP **BOCA RATON FL 33486**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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: *Bulent Y. Aliev*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

07/02/99 (954) 524-3284

CR2E034 (5/99)

0061878

P97000019841
590523-90010-29

January 18, 1999

Secretary of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: ATLAS CONSULTING SERVICES, INC., Document #P97000019841

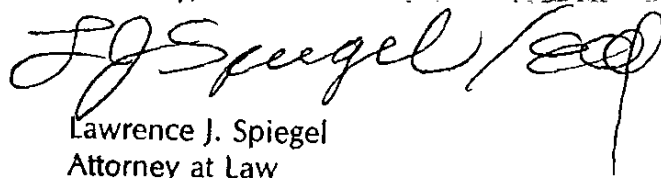
Dear Sirs:

Please let this letter serve as authorization to change the the following relating to the above captioned corporation:

- | | | |
|----|---|--|
| 1. | Current Corporate Address on File: | New Corporate Address: |
| | 1550 Seabreeze Boulevard, Suite 211
Fort Lauderdale, Florida 33316 | 309 Hendricks Isle, #3
Fort Lauderdale, Florida 33301 |
| 2. | Current Mailing Address on File: | New Mailing Address: |
| | the same | the same |

Thank you for your attention to this matter. Should you have any questions, please contact the undersigned.

Sincerely,


Lawrence J. Spiegel
Attorney at Law

cc: Bulent Y. Aliev



P97000019841
590523-90010-29

07/07/99

Dear Sir/Madam,

I changed my corporate mailing address in January, but the FIRST corporate renewal FEE FORM never arrived at my NEW address. The only one I received is the Late Filing Notice. On contacting your office I was advised by the officer to send the Normal Filing FEE ASAP.

Best regards

BULENT ALIYEV FOR
ATLAS CONSULTING SERVICES INC.

Bulent Y. Aliyev