2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 22, 2001 8:00 am Secretary of State DOCUMENT # P97000028834 05-22-2001 90793 038 ***150.00 3514 SO. OCEAN DRIVE, INC. Principal Place of Business Mailing Address 553063 % Atlantia Holdings % Atlantia Holdings 910 S.E. 17th St., Suite 300 910 S.E. 17th St., Suite 300 Ft. Lauderdale, FL 33316 Ft. Lauderdale, FL 33316 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0741272 Not Applicable 7in Country Zip \$8.75 Additional Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WAGNER, J 647 E. DANIA BEACH BOULEVARD Wagner, J. % Atlantia Holdings DANIA BEACH FL 33004 910 SE 17th St., # 300 Zip Code Ft. Lauderdale, FL 33316 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. (NOTE: Registered Agent signature required when reinstating) printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001. Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE TITLE **PSTD** Delete Bailey, William A. NAME BOULIS, GUS % Atlantia Holdings STREET ADDRESS STREET ADDRESS 647 E. DANIA BEACH BOULEVARD 10 SE 17th St., # 300 CITY-ST-ZIP CITY-ST-7IE **DANIA FL 33004** Ft. Lauderdale, FL 33316 TITLE Addition ☐ Delete TITLE NAME NAME Farrell, James B. STREET ADDRESS STREET ADDRESS % Atlantia Holdings CITY-ST-ZIP CITY-ST-ZIP 910 SE 17th St., #300 ☐ Addition hance ☐ Delete TITLE Ft. Lauderdale, FL 33316 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if

ING OFFICER OR DIRECTOR

FILED