

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000049773

1. Entity Name

ATLAS C. LINE, INC.

Principal Place of Business

Mailing Address

PO BOX 824821

PO BOX 824821

MIAMI FL 33126 US

MIAMI FL 33126 US

2. Principal Place of Business

3. Mailing Address

Suite Apt. #, etc.

Suite. Apt. #. etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0806034

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIRES, VILMAR

8066 NW 10TH STREET #8

MIAMI FL 33126

Name

Tax House Corporation

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

3929 N Federal Hwy

City

Pompano Beach

FL

Zip Code

33064

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.

SIGNATURE

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

Breno R. Gomes - President of Tax House Corporation

09/18/01

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

FILE NOW! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FERRAZ FUCHS, PATRICIA PO BOX 824821 MIAMI FL 33126 US <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000004621130--6 -10/03/01--01021--013 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patricia Ferraz Fuchs

09/18/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

01 SEP 25 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

HEWLETT
PACKARD

FLORIDA DEPARTMENT OF STATE
Division of Corporation
2001 Uniform Business Report (UBR)
409 East Gaines Street
Tallahassee, FL 32399

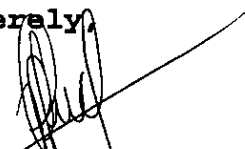
Re: *Filing of Uniform Business Report 2001*
P97000049773
ATLAS C LINE, INC

To Whom It May Concern:

This letter is to inform you that we have never received a Uniform Business Report form in the mail. We would like to request you that you forgive all extra fees and penalties other than the primary of \$150.00 and accept the filling of our attached UBR, which has been prepared by our accountant.

Any questions or concern, feel free to contact our accountant at (954) 782-4000 and speak to Mr. Breno Gomes.

Sincerely,


PATRICIA FERRAZ FUCHS - President
ATLAS C LINE, INC
PO BOX 824821
MIAMI FL 33126 US