

# 2001 UNIFORM BUSINESS REPORT (UBR)

102

**DOCUMENT# P97000049773**

1. Entity Name

**ATLAS C. LINE, INC.**

**FILED**

**01 SEP 25 PM 12:45**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

HEWLETT  
PACKARD

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

4. FEI Number

**65-0806034**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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.  (See criteria on back)

**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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
SD	FERRAZ FUCHS, PATRICIA	PO BOX 824821	MIAMI FL 33126 US	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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-10/03/01--01021--013  
\*\*\*\*150.00 \*\*\*\*150.00

LS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Patricia Ferraz Fuchs**

**09/18/01**

Date

Daytime Phone #

2002

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