2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **P99000097875** Aug 08, 2000 8:00 am Secretary of State ATI GROUP, INC. 08-08-2000 90009 043 ***150.00 Principal Place of Business Mailing Address 800 SOUTH PARK ROAD 800 SOUTH PARK ROAD SUITE 214 SUITE 214 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For Not Applicable Zip Ζįρ Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOSEPH, EARLENE Street Address (P.O. Box Number is Not Acceptable) 3820 SW 52ND AVE. HOLLYWOOD FL 33023 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change Addition TITLE Secretary Treasurer - Delete TITLE President NAME NAME Earlene STREET ADDRESS STREET ADDRESS മമ ടയ CITY-ST-ZIP CITY-ST-ZIP (lywazd), ☐ Addition TITLE □ Delete Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITI F NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with an other like empowered.

305 579 93/3

Daytime Phone #

attachment Woeth pgg000091895 Prob7143)

ATI GROUP INC 800 S. PARK ROAD HOLLYWOOD, FL 33021

July 31, 2000

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

To Whom It May Concern:

Please be advised that I have enclosed a check for \$150.00 for the filing of the 2000 Uniform Business Report. A representative from your Public Inquiry Section has advised me that this is the amount due for filing, prior to late fees. This is the first year that ATI GROUP INC will complete a Uniform Business Report. I was not previously aware of the requirements of this report.

Please feel free to contact me directly if you should have any questions. My daytime phone number is (305) 579-9313.

Sincerely,

Earlene Joseph,

President