## 2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR)  DOCUMENT # S54221					FILED Jan 24, 2002 8:00 am Secretary of State			
1. Entity Name					01-24-2002 90362 031 ***150.00			
ATLAS A	LUTO SERVICE, INC.		2 <b>3</b>		01-24-2002 903	002 031 ***130.	00	
Principal Plac	ce of Business	Mailing Address	·					
29927 SR-54-W WESLEY CHAPEL FL 33543 US		29927 SR 54 WEST WESLEY CHAPEL FL 33543 US				(1) 11115 ANY NION 11111		
Principal Place of Business     3. Mailing Address			<del></del>			HAY O'ROLL BIN'I MINING BIN'I M	4  (	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4.	El Number 59-3065345	<del></del>	plied For	
Zip	Country	Zip	Zip Country		5. Certificate of Status Desired S8.75 Additional Fee Required			
<u></u>	6. Name and Address of Curren	t Registered Agent	Name	7. N	lame and Address of New Regi	stered Agent		
VANDINE, DANIEL J.			Street Ac	Street Address (P.O. Box Number is Not Acceptable)				
5242 FOX HUNT DRIVE WESLEY CHAPEL FL 33543						<del> </del>		
			City			FL Zip Code	е	
Tax filing r	Signature, typed or printed name of registered agenoration is eligible to satisfy its Intangibl requirement and elects to do so. ria on back)	e FILE NOW!!	Registered Agent signature II FEE IS \$150.0 IZ Fee will be \$55 Ie to Department	0	instating)  10. Election Campaign Financ Trust Fund Contribution.	+	<b>0</b> May Be I to Fees	
11.	OFFICERS AND	DIRECTORS	12.	AD	DITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	5 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VANDINE, DANIEL J. 5242 FOX HUNT DRIVE WESLEY CHAPEL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VANDINE, JOAN P 5242 FOX HUNT DRIVE WESLEY CHAPEL FL	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	THE STATE OF THE S	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP.			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP			☐ Change	☐ Addition	
13. I hereby of indicated of the corp changed,	certify that the information supplied wit on this report or supplemental report poration or the receiver or frusted em- or on an attachment with an address	h this liling does not qualify for strug and accurate and that m owered to execute this report a with all other like empowered.	the exemption state by signature shall ha as required by Chap	d in Section ve the same l oter 607, Florid	I 19.07(3)(i), Florida Statutes. I fur egal effect as if made under oath da Statutes; and that my name ap	ther certify that the in that I am an officer pears in Block 11 or	nformation or director Block 12 if	