

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000095797

Entity Name: ATLANTIS MEGA MEDIA LLC**Current Principal Place of Business:**2420 16TH AVE SO
ST. PETERSBURG, FL 33712**Current Mailing Address:**2420 16TH AVE SO
ST. PETERSBURG, FL 33712**FEI Number:** 47-1106315**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ANTHONY, VENCENTA
2420 16TH AVE SO
ST. PETERSBURG, FL 33712 US*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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	WILLIAMS, LAMAR J
Address	2420 16TH AVE SO
City-State-Zip:	ST. PETERSBURG FL 33712

Title	AP
Name	WILLIAMS, ARIA L
Address	7161 BOULDER PASS
City-State-Zip:	UNION CITY GA 30291

Title	AUTHORIZED MEMBER
Name	WILLIAMS, ALEXANDER L
Address	2420 16TH AVE SO
City-State-Zip:	ST. PETERSBURG FL 33712

Title	AMBR
Name	NETTLES, CANDICE N
Address	7161 BOULDER PASS
City-State-Zip:	UNION CITY GA 30291

Title	AP
Name	WILLIAMS, ARMON L
Address	2420 16TH AVE SO
City-State-Zip:	ST. PETERSBURG FL 33712

Title	AUTHORIZED MEMBER
Name	NETTLES, JAVAN DWIGHT
Address	1404 MLK JR. BLVD
City-State-Zip:	SILER CITY FL 27344

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES LAMAR WILLIAMS**MANAGER****04/15/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date