


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 504912 (7) 1. Corporation Name ATLANTIC GOOD SERVICES, INC.			
Principal Place of Business 3272 NW 30TH STREET MIAMI FL 33142 US		Mailing Address 3272 NW 30TH STREET MIAMI FL 33142 US	
2. Principal Place of Business 21 ATLANTIC GOOD SERVICES INC Suite, Apt. #, etc. 22 3005-3037 N. W. 24 ST. City & State 23 MIAMI, FL. Zip 24 33142		2a. Mailing Address 25 SAME Suite, Apt. #, etc. 27 City & State 28 Zip 29	
9. Name and Address of Current Registered Agent **AUSTIN/RICHARD S. ESQ** 3272 NW 30TH STREET MIAMI FL 33142 **RESIGNED 4/1/98		10. Name and Address of New Registered Agent 81 Name GUILLERMO SANCHEZ JR. 82 Street Address (P.O. Box Number is Not Acceptable) 3005-3037 N. W. 24 ST. 83 MIAMI, FL. 84 City MIAMI 85 Zip Code 33142	
11. Pursuant to the provisions of Sections 607.002 and 607.1505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <i>Guillermo Sanchez Jr</i> DATE 4-10-98			
12. OFFICERS AND DIRECTORS TITLE PS <input type="checkbox"/> DELETE NAME SANCHEZ, GUILLERMO J. STREET ADDRESS 3272 NW 30TH STREET CITY-ST-ZIP MIAMI FL TITLE VP <input type="checkbox"/> DELETE NAME SANCHEZ, GUILLERMO JR. STREET ADDRESS 3005-3037 N. W. 24 ST. CITY-ST-ZIP MIAMI FL TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/10/1976	
4. FEI Number 59-1768687	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Guillermo Sanchez Jr*

4-10-98 305-634-9991