

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065409

FILED  
Apr 09, 2004  
Secretary of State

Entity Name: ATP DESIGN & SALES, INC.

## Current Principal Place of Business:

2642 SE WILLOUGHBY BLVD.  
STUART, FL 34994 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 817  
PALM CITY, FL 34990

## New Mailing Address:

FEI Number: 65-1024447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PURINO, ALBERT T  
2642 SE WILLOUGHBY BLVD.  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PURINO, ALBERT T  
Address: PO BOX 817  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: PURINO, MICHELE A  
Address: 18810 MISTY LAKE DR  
City-St-Zip: JUPITER, FL 33458

Title: D ( ) Delete  
Name: WILSON, LISA M  
Address: 414 BRUCE AVE  
City-St-Zip: MILAN, IL 61264

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PURINO, MICHELE A  
Address: PO BOX 817  
City-St-Zip: PALM CITY, FL 34991

Title: D (X) Change ( ) Addition  
Name: WILSON, LISA M  
Address: PO BOX 817  
City-St-Zip: PALM CITY, FL 34991

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERT T PURINO

PRES

04/09/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date