

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000071669

**Entity Name:** 1100 ATLANTIC COLLISION, INC.

**Current Principal Place of Business:**

482 BLAKE AVE.  
BROOKLYN, NY 11207

**Current Mailing Address:**

482 BLAKE AVE.  
BROOKLYN, NY 11207 US

**FEI Number:** 46-3549930

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC.  
7452 NARCOOSSEE RD  
UNIT C  
ORLANDO, FL 32822 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

**Officer/Director Detail :**

Title	P, T	Title	S, D
Name	CAPUS, MARC	Name	CAPUS, MARC
Address	482 BLAKE AVE.	Address	482 BLAKE AVE.
City-State-Zip:	BROOKLYN NY 11207	City-State-Zip:	BROOKLYN NY 11207

*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 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 all other like empowered.*

**SIGNATURE:** MARC CAPUS

**PRESIDENT**

**01/06/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date