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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #
1. Corporation Name

548716

(0)

THE GREAT ATLANTIC TRADING COMPANY, INC.

Principal	Place	Business

Mailing Address

FILED Jan 20 1998 8:00am Secretary of State



1337 N DIXIE HIGHWAY LAKE WORTH FL 33460 1337 N DIXIE HIGHWAY LAKE WORTH FL 33460				DO NOT WRITE IN 3. Date Incorporated or Qualified	I THIS SF	PACE			
					10/07/1977				
	face of Business	2a. Mailing Address			4. FEI Number	-		Applie	d For
3475	WOOLBRIGHT ROAD	26 3475 WOOLBRI	GHT	ROAD	59-1789950			Not Ap	plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.7	5 Addit	tional
22		27 i			5. Certificate of Status Desired		Fee	Requir	ed
الت	TON BEACH, FL	City & State BOYNTON BEAC	н,	FL	Election Campaign Financing Trust Fund Contribution	\Box		00 May	
Zip	Country		ountry		8. This corporation owes or has paid	the curre	nt year		
24 3343	36 25 ALM BEACH	100	PAL	M BEAC			Yes	LXN0	
	9. Name and Address of Current	Registered Agent	1041	N	10. Name and Address of New Regis	tered A	gent		
MIC	CHAEL, NORMAN J		81	Name					
1337 N DIXIE HIGHWAY			82	Street Addres	ss (P.O. Box Number is Not Acceptable)	, 			
LAI	KE WORTH FL 33460		83						
			63						
			84	City		FL	85 Z	ip Code	9
dd Disservent	to the previous of Coatless 607 0502	and 607 1509. Elected Statutes the	- above	named corner	ration submits this statement for the aur		hanoin	a ite rev	rietered
office or r	egistered agent, or both, in the State of	Florida, Such change was authori:	zed by	the corporation	ration submits this statement for the purp n's board of directors. I hereby accept to	he appoi	intment	as regi	stered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida S	tatutes.						
SIGNATURE	Signature, lyped or printed name of registered agent	end life if anglicable (NOTE: Registr	ered Agen	nt signature required	when reinstating)	DATE			
12.	OFFICERS AND				ADDITIONS/CHANGES TO OFFICER	RS AND	DIRECT	ORS IN	l 12
TITLE	PD	DELETE 1.1	1 TITLE				Chang	je 🗀	Addition
NAME	MICHAEL, NORMAN J	1.2	2 NAME						
STREET ADDRESS	10460 PRESTWICK ROAD	1.3	3 STREET #	ADDRESS					
CITY - ST - ZIP	BOYNTON BEACH FL	1.4	4 CITY-ST	- ZIP					
TITLE	D	DELETE 2.1	1 TITLE			Ĺ	Chang	je 🗀	Addition
NAME	MICHAEL, ELISHKA	2.2	2 NAME	1					
STREET ADDRESS	10460 PRESTWICK ROAD	2.3	3 STREET A	ADDRESS	,	, :			
CITY-ST-ZiP	BOYNTON BEACH FL		4 CITY - ST	T-ZIP					
TITLE		DELETE 3,1	1 TITLE	}		L	Chang	e L	Addition
NAME		3.2	2 NAME						
STREET ADDRESS		3.3	3 STREET A	ADDRESS					
CITY - ST - ZIP			4. CITY - ST	r-ZiP		 -	LObert		Addition
TITLE			I TITLE			L	Chang	,E	Addition
NAME			2 NAME						
STREET ADDRESS			3 STREET A						
CITY-ST-ZIP			4 CITY - ST	- ZIP		г	Chang	10	Addition
TITLE			1 TITLE			L	cuasig	,r L.	I VOOIDON I
NAME			2 NAME						
STREET ADDRESS		5.3	3 STREET A	NUURESS					

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 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 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 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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the Information stated in Section 119.07(3)(ii), Florida Statutes. I further certify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify for the exemption stated in Section 119.07(3)(iii), Florida Statutes. I further certify for the exemption stated in Section 119.07(3)(iii), Florida Statutes. I further certify for the exemption stated in Section 119

5,4 CITY - ST - ZIP

6.3 STREET ADDRESS

NORMAN J. MICHAEL

6.1 TITLE 6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

1/7/98

561/733-4353

___ Change ___ Addition