

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 622550

Entity Name: ATENA CORPORATION

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

314 SW 185 AVENUE
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

314 SW 185 AVE
PEMBROKE PINES, FL 33029 US

New Mailing Address:

314 SW 185 AVENUE
PEMBROKE PINES, FL 33029 US

FEI Number: 59-1914045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TSIORTOURTSIDIS, EMMANUEL
314 SW 185 AVE
PEMBROKE PINES, FL 33029 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: P () Delete
Name: TSIORTOURTSIDS, EMMANUEL
Address: FILLIPO 60 KATERINE
City-St-Zip: GREECE, 60100,

Title: VD () Delete
Name: TSIORTOURTSIDS, HISAIA P
Address: FILLIPO 60 KATERINE
City-St-Zip: GREECE, 60100,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EMMANUEL TSIORTOURTSIDIS

PRE

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date