

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 683189

Entity Name: ATLANTIC VIEW, INC.

FILED  
Mar 14, 2011  
Secretary of State

**Current Principal Place of Business:**

4299 COLLINS AVE  
MIAMI BCH., FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

4333 COLLINS AVE  
EXECUTIVE OFFICE  
MIAMI BCH., FL 33140

**New Mailing Address:**

FEI Number: 65-0058553

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TANEN, JEFFREY S ESQ  
2 S. BISCAYNE BLVD., STE 3700  
MIAMI, FL 33131 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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: NEISS, CHARLES  
Address: 1860 FLATBUSH AVE  
City-St-Zip: BROOKLYN, NY 11210

Title: VPS  
Name: NEISS, JACOB  
Address: 1860 FLATBUSH AVE  
City-St-Zip: BROOKLYN, NY 11210

Title: VP  
Name: ARIELLA, NEISS  
Address: 1860 FLATBUSH AVE  
City-St-Zip: BROOKLYN, NY 11210

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: JACOB NEISS

VPS

03/14/2011

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

\_\_\_\_\_  
Date