

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90232 028 ***150.00

DOCUMENT # 837670
 1. Entity Name
ATALANTA CORPORATION



Principal Place of Business Mailing Address
ATALANTA CORP **ATALANTA CORP**
ATALANTA PLAZA **ATALANTA PLAZA**
ELIZABETH, NJ 07206 **ELIZABETH, NJ 07206**

60001923



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip - - - - - Country Zip - - - - - Country

01062006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For
13-5520722 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VARELA, MARIO
7925 N.W. 12TH ST.
MIAMI, FL 33126

Name
 Street Address (P.O. Box Number is Not Acceptable)
9475 NW 13th STREET
 City **MIAMI** FL Zip **33126**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD Delete
 NAME GELERT, GEORGE G
 STREET ADDRESS ATALANTA PLAZA
 CITY-ST-ZIP ELIZABETH, NJ

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE S Delete
 NAME HERRERAS, BARBARA
 STREET ADDRESS ATALANTA PLAZA
 CITY-ST-ZIP ELIZABETH, NJ

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE CFO Delete
 NAME GELLERT, ANDREW
 STREET ADDRESS ATALANTA PLAZA
 CITY-ST-ZIP ELIZABETH, NJ 07206

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara Herrera CorpSec* 01/17/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #