

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000978

FILED
Apr 03, 2009
Secretary of State

Entity Name: ATLANTIC STAR INTERMEDIARIES, INC.

Current Principal Place of Business:

11 HANOVER SQUARE, 15TH FLOOR
NEW YORK, NY 10005

New Principal Place of Business:

39 BROADWAY
SUITE 1440
NEW YORK, NY 10006

Current Mailing Address:

390 N. BROADWAY
JERICO, NY 11753

New Mailing Address:

FEI Number: 11-2825863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 333312525 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: PRES () Delete
Name: CORDA, FRANK A
Address: 11 HANOVER SQUARE, 15TH FLOOR
City-St-Zip: NEW YORK, NY 10005

Title: CEO () Delete
Name: MARINO, WILLIAM A
Address: 390 N. BROADWAY
City-St-Zip: JERICO, NY 11753

Title: COO () Delete
Name: LOMBARDI, HENRY C
Address: 390 N. BROADWAY
City-St-Zip: JERICO, NY 11753

Title: SEC () Delete
Name: MCGANN, PETER
Address: 390 N. BROADWAY
City-St-Zip: JERICO, NY 11753

Title: DIR () Delete
Name: MARINO, WILLIAM A
Address: 390 N. BROADWAY
City-St-Zip: JERICO, NY 11753

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: WILLIAM A MARINO

CEO

04/03/2009

Electronic Signature of Signing Officer or Director

_____ Date