


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 06, 2005 8:00 am**  
**Secretary of State**

06-29-2005 90003 042 \*\*\*150.00  
09-06-2005 90134 003 \*\*\*400.00


|  |   |
|--|---|
| <b>DOCUMENT # F77684</b>                       |  |
| 1. Entity Name<br>ATLANTIC IMPORTED AUTO, INC. |   |

|  |  |
|--|--|
| Principal Place of Business<br>7311 ATLANTIC BLVD<br>JACKSONVILLE, FL 32211 US | Mailing Address<br>7311 ATLANTIC BLVD<br>JACKSONVILLE, FL 32211 US |
|--|--|

**DO NOT WRITE IN THIS SPACE**

*in last month.*

**50064998**



02102005 No Chg-P CR2E034 (10/03)

|   |                               |
|---|-------------------------------|
| 4. FEI Number<br>59-2194260   | Applied For<br>Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required |                               |

6. Name and Address of Current Registered Agent

O'NEAL, PATRICK  
1589 HOLLY OAKS LAKE ROAD, WEST  
JACKSONVILLE, FL 32225

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DPST<br>O'NEAL, PATRICK<br>1589 HOLLY OAKS LAKE ROAD, WEST<br>JACKSONVILLE, FL 32225 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>O'NEAL, LINDA<br>1589 HOLLY OAKS ROAD, WEST<br>JACKSONVILLE, FL 32225          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

*Sent*

*Mail fee only 400.00*

**DO NOT WRITE IN THIS SPACE**

*Report Already Received*

12. 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 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

## ATTACHMENT

50064998  
#F77684

Dear Sirs :  
This is the late  
fee, it was not included  
in the check originally  
sent.

You have our annual  
Report already.

Thank you.

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