2004 FOR PROFIT CORPORATION ANNUAL REPORT

		ANN	UAL	REPURI		<u> </u>		_	1-11-1-	5-		
DOCUI 1. Entity Name ATOMIC				5×04 00	T 18 AH 9 T 18 AH 9 THANK OF S AHASSEE FI	TATE ORIDA) <u>oe</u>	<u> </u>				
Principal Place	e of Business			Mailing Address				500	VHYSSET.			
% JOSEPH PERROTTI 2033 NW 22ND CT MIAMI, FL 33142 US				% JOSEPH PERROTTI			R	l	ratera		bΥ	/
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				09132004	Chg-P	CR2E0	34 (10/03)	+
City & State				City & State				4. FEI Numbe 65-0132			Not	plied For t Applicable
Zip	Country			Zip Country					of Status Desired		\$8.75 Addi Fee Required	
6Name and Address of Current Registered Agent								7. Name and	Address of New R	egisterea A	gent	
PERROTTI, JOSEPH 2033 NW 22ND CT MIAMI, FL 33142				Name Street Ad			ess (P.O. Box Number is Not Acceptable)					
					City E1 Zip Code					•		
						J.,				FL		
			ternent for the	ne purpose of changing its	register	ed office or reg	ister	red agent, or bot	n, in the State of Flo	orida. Lam l	amiliar with,	and accept
the obligat	ions of A gist	ered ageny		//								
Signature Signate Lyped or putted name of registered agent and title if applicable. (NOTE: Registered							quirec	I when reinstating)		DATE		
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004 9. Election Campaign Financing Trust Fund Contribution.							\$5 . Add	.00 May Be led to Fees				
10.	·	OFFICE	ERS AND DI	RECTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTORS	3 IN 11
TITLE	DPV			☐ Delete	TITL	E	•				☐ Change,	☐ Addition
NAME	PERROT	TI, JOSEPH			NAM	E		4 <u></u>				
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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 supplymental 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 chertific empowered.												
SIGNAT	UKE: _	SIGNATURE: SECNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Davine Prone #										

Dec No. # K89965

Oct-14-04 TEL. 305 634-3/81

DEAR SIRS:

My NAME IS JOSEPH PERROTTI, I AM THE OWNER OF ATOMIC AGE. THINGS ARE BAD, BUSINESS IS SLOWER THAN EVER, AND I CAN HARDLY MAKE ENDS MEST. WE HAD A BIG STORM here IN HIALBAK, AND I guess my MAIL WAS LOST OR MISS PLACED. I JUST RECEIVED THE NOTICE OF MY CORPERATION FEE'S AND I AM LATE. PLEASE WAIVE THE LATE CHARGES, IT IS HARD ENOUGH TO PAY THE REGULAR FOR. 2033 NW. 22 OF. THANK YOU VERY MUCH.