

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L37080

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** M.P. ATLANTIC FINANCIAL GROUP INC.

**Current Principal Place of Business:**

% MARK BENJAMIN PILLING  
10350 QUITO ST  
COOPER CITY, FL 33026

**New Principal Place of Business:**

**Current Mailing Address:**

% MARK BENJAMIN PILLING  
10350 QUITO ST  
COOPER CITY, FL 33026

**New Mailing Address:**

**FEI Number:** 65-0169309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PILLING, MARK BENJAMIN  
10350 QUITO ST  
COOPER CITY, FL 33026 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: DP  
Name: PILLING, MARK BENJAMIN  
Address: 10350 QUITO STREET  
City-St-Zip: COOPER CITY, FL 33026

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: MARK BENJAMIN PILLING

PRES

02/09/2012

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

\_\_\_\_\_  
Date