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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORFORATIONS

1996

L79810 DOCUMENT #

(2)

AAA ATLANTIC INDUSTRIES, INC. Principal Place of Business Mailing Address 2525 NF 51ST ST. 2525 NE 51ST ST.							
2525 NE 51ST ST. 2525 I LIGHTHOUSE FL 33064 LIGHT					of Last Report		
				3. Date incorporated or Qualified 06/08/1990		3/06/19	
Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number		A	oplied For
		26		65-0208155			ot Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional equired
Crty & State		City & State		6. Election Campaign Financing			May Be
i		28		Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	Ζιρ	Country	8. This corporation has liability for i	intangible tax	under s	199.032,
L	9. Name and Address of Curre	29	30	10. Name and Address of New F		gent	
	9. Name and Address of Curr	ent negistereo Agent	B1 Name	10. Namo dita stata 300 di secono			
MARCO), JAMES		82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
	E 51ST ST.		L,	JEGG V. C. CONTROLLOU STROLLICOSTICIO			
	IOUSE FL 33064		83				
			84 City	· · · · · · · · · · · · · · · · · · ·		85 Zip	Code
				the state of the s	FL rooms of about	noincrite re	nistered office
 Pursuant to or registere familiar with 	o the provisions of Sections 607.05 ad agent, or both, in the State of Flo h, and accept the obligations of, Se	orida. Such change was autho ection 607.0505, Florida Statut	rized by the corporation's bodies.	and of directors. Thereby beespective epps			
IGNATURE .	Signature, typed or printed name of registored ag		rized by the corporation's bodies. INDIE Fragistered Agent signature requirements. 13.		DATE ICERS AND I	DIRECTO	RS IN 12
IONATURE	Signature, typed or printed name of registored ag OFFICERS A	jont and title if applicable	INOTE: Progetered Age: Lsig lature requir	rad when remetal righ	DATE ICERS AND I		
IGNATURE	Signature, typed or printed name of registored ag OFFICERS A PTD MARCO, JAMES	part and title if applicable AND DIRECTORS	NOTE Registered Agent signature requirements 13. 1 1 THE 1.2 NAME	rad when remetal righ	DATE ICERS AND I	DIRECTO	RS IN 12
CALLER STATE	Signature, typico or printed name of registored ag OFFICERS A PTD MARCO, JAMES 2525 NE 51ST ST.	part and title if applicable AND DIRECTORS	NOTE: Residered April signature regin 13. 1 1 Title 1.2 NAME 1.3 STREET ADDRESS	rad when remetal righ	DATE ICERS AND I	DIRECTO	RS IN 12
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SIGNATURE:

JAMES L. MARCO TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-96 305-969-0245