

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 27, 1999 8:00 am
Secretary of State

07-27-1999 90003 016 ***150.00

DOCUMENT # **M00695**

1. Corporation Name

ATLANTIC 1ST EQUITY, INC.

Principal Place of Business

241 NO UNIVERSITY DRIVE
PEMBROKE PINES FL 33024
US

Mailing Address

241 NO UNIVERSITY DRIVE
PEMBROKE PINES FL 33024
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/17/1984

4. FEI Number

59-2425352

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

ARON, ADRIENNE
245 N UNIVERSITY DR
PEMBROKE PINES FL 33024

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE
NAME SANDOW, SIDNEY
STREET ADDRESS 245 N UNIVERSITY DR
CITY-ST-ZIP PEMBROKE PINES FL

TITLE DS ☐ DELETE
NAME ARON, ADRIENNE
STREET ADDRESS 245 N UNIVERSITY DR
CITY-ST-ZIP PEMBROKE PINES FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/13/99

Date

Daytime Phone #

CR2E034 (5/99)



July 13, 1999

Annual Reports Filings
Division of Corporation
P.O. Box 6327
Tallahassee, Fl. 32314

Re: 1999 Profit Corporation Annual Report

To Whom it May Concern:

Receipt is acknowledged of your 1999 Profit Corporation Annual Report packet noted 2ND NOTICE. This was the first report received by us for 1999 and we are requesting that we not be penalized the additional filing fee of \$400.00.

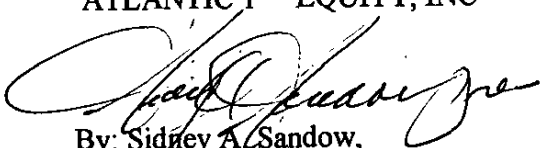
Please note that in past years our payments were paid on a timely basis because we received the report packet on time.

Enclosed please find the report, duly signed by myself an Officer of the Corporation and a check in the amount of \$150.00 in accordance with instructions by your telephone representative.

If there are further questions regarding this matter please feel free to contact the undersigned.

Very truly yours

ATLANTIC 1ST EQUITY, INC


By: Sidney A. Sandow,
President

M00695
595860-90003-16

245 NO. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024
(305) 961-7210