

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90471 031 ***150.00

DOCUMENT # P00000082783

1. Entity Name

ATLANTIC H&G TRADING CORP.

Principal Place of Business

750 NE 62ND STREET
 SUITE 210
 MIAMI FL 33138

Mailing Address

750 NE 62ND STREET
 SUITE 210
 MIAMI FL 33138

2. Principal Place of Business

6301 BISCAYNE BLVD.

3. Mailing Address

6301 BISCAYNE BLVD.

Suite, Apt. #, etc.

200

Suite, Apt. #, etc.

200

City & State

MIAMI

City & State

MIAMI

Zip

33138

Country

USA

Zip

33138

Country

USA

4. FEI Number 65-1037337

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEDUC, REJEAN
 750 NE 62ND STREET
 SUITE 210
 MIAMI FL 33138

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
 NAME HARDENNE, CHRISTOPHE ☐ Delete
 STREET ADDRESS 750 NE 62ND STREET, STE 210
 CITY-ST-ZIP MIAMI FL 33138

TITLE VSTD
 NAME GRAFF, FABIAN ☐ Delete
 STREET ADDRESS 750 NE 62ND STREET, STE 210
 CITY-ST-ZIP MIAMI FL 33138

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VSTD ☒ Change ☐ Addition
 NAME GRAFF, FABIAN
 STREET ADDRESS 7601 E. TREASURE DRIVE # 1022
 CITY-ST-ZIP NORTH BAY VILLAGE, FL 33141

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 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

FABIAN GRAFF

03/05/2002

305 762 5324

Date

Daytime Phone

CR2004 (9/01)