

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000104984

Entity Name: ATG PARTNERS, INC.

FILED
Oct 10, 2005
Secretary of State

Current Principal Place of Business:

14480 SW 216 STREET
MIAMI, FL 33170 US

New Principal Place of Business:

Current Mailing Address:

14480 SW 216 STREET
MIAMI, FL 33170 US

New Mailing Address:

FEI Number: 65-1051778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMARO, JOEL
14480 SW 216 STREET
MIAMI, FL 33170 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: JOEL AMARO

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AMARO, JOEL
Address: 14480 SW 216 STREET
City-St-Zip: MIAMI, FL 33170

Title: VD () Delete
Name: TRUJILLO, JESUS
Address: 14480 SW 216 STREET
City-St-Zip: MIAMI, FL 33170

Title: STD () Delete
Name: GONZALEZ, ANDRES A
Address: 14480 SW 216 STREET
City-St-Zip: MIAMI, FL 33170

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SVP (X) Change () Addition
Name: TRUJILLO, JESUS
Address: 14480 SW 216 STREET
City-St-Zip: MIAMI, FL 33170

Title: VP (X) Change () Addition
Name: GONZALEZ, ANDRES A
Address: 14480 SW 216 STREET
City-St-Zip: MIAMI, FL 33170

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOEL AMARO

Electronic Signature of Signing Officer or Director

PSD

10/10/2005

Date