

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000053703

FILED
Apr 22, 2005
Secretary of State

Entity Name: A.T.M. IMPORT & EXPORT INC.

Current Principal Place of Business:

5944 CORAL RIDGE DR.
SUITE 150
CORAL SPRINGS, FL 33076 US

New Principal Place of Business:

Current Mailing Address:

5944 CORAL RIDGE DR.
SUITE 150
CORAL SPRINGS, FL 33076 US

New Mailing Address:

FEI Number: 65-1142372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHACIN MARIN, ERNESTO JOSE
3899 NW 7 ST. SUITE 203
MIAMI, FL 33126 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHACIN MARIN, ERNESTO JOSE
Address: 5720 LAKESIDE DRIVE #610
City-St-Zip: MARGATE, FL 33063 US

Title: D () Delete
Name: FERRER MADRIZ, CARMEN AMELIA
Address: 5720 LAKESIDE DRIVE #610
City-St-Zip: MARGATE, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ERNESTO CHACIN

D

04/22/2005

Electronic Signature of Signing Officer or Director

_____ Date