

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000091913

Entity Name: ATMOSPHERES EVENTS, INC.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

3410 WEST SAN JUAN STREET
SUITE A
TAMPA, FL 33629 US

New Principal Place of Business:

8509-C SUNSTATE STREET
TAMPA, FL 33634 US

Current Mailing Address:

8509C SUNSTATE STREET
TAMPA, FL 33634 US

New Mailing Address:

8509-C SUNSTATE STREET
TAMPA, FL 33634 US

FEI Number: 59-3746525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUNTREE, PAMELA O
3410 WEST SAN JUAN STREET
SUITE A
TAMPA, FL 33629 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: P () Delete
Name: ROUNTREE, PAMELA O
Address: 3410 WEST SAN JUAN STREET, SUITE A
City-St-Zip: TAMPA, FL 33629

Title: V () Delete
Name: SYKES, JOHN
Address: 925 APPALOOSA RD.
City-St-Zip: TARPON SPRINGS, FL 34688

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 exemption stated in Chapter 119, 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: AMY L MARTIN

CPA

02/24/2009

Electronic Signature of Signing Officer or Director

Date