

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000110296

Entity Name: ATSACO CORP.

FILED
Apr 04, 2005
Secretary of State

Current Principal Place of Business:

1320 SOUTH DIXIE HIGHWAY
SUITE 280
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

1320 SOUTH DIXIE HIGHWAY
SUITE 280
CORAL GABLES, FL 33146

New Mailing Address:

400 SW 10TH STREET
2
MIAMI, FL 33130

FEI Number: 77-0589933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ DE VARONA, RAUL J
1320 SOUTH DIXIE HIGHWAY
SUITE 280
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

SANCHEZ DE VARONA, RAUL J
400 SW 10TH STREET
2
MIAMI, FL 33130 US

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:

04/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARTINEZ, TITO
Address: 1320 SOUTH DIXIE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: MARTINEZ, JULIETA
Address: 1320 SOUTH DIXIE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: ACOSTA DE MARTINEZ, JULIETA
Address: 1320 SOUTH DIXIE HIGHWAY
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: TITO MARTINEZ

D

04/04/2005

Electronic Signature of Signing Officer or Director

Date