

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016365

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: ATLANTIC OCEAN INTERNATIONAL, CORP.

## Current Principal Place of Business:

7205 NW 68TH ST., #14  
MIAMI, FL 33166

## New Principal Place of Business:

8018 NW 29 STREET  
DORAL, FL 33122

## Current Mailing Address:

7205 NW 68TH STREET  
14  
MIAMI, FL 33166

## New Mailing Address:

8018 NW 29TH STREET  
DORAL, FL 33122

FEI Number: 75-2996782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OCHOA, EDITH  
651 NW 82 AVE. SUITE #115  
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: PD ( ) Delete  
Name: OCHOA, EDITH  
Address: 651 NW 82 AVE. SUITE #115  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete  
Name: OCHOA, JOSEFINA C  
Address: 651 NW 82 AVE. SUITE #115  
City-St-Zip: MIAMI, FL 33126

Title: SD ( ) Delete  
Name: OCHOA, MARTA  
Address: 854 NW 87 AVE. #208  
City-St-Zip: MIAMI, FL 33172

Title: TD (X) Delete  
Name: RESTREPO, EDITH  
Address: 10420 SW 92 STREET  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: RESTREPO, EDITH  
Address: 10420 SW 92 STREET  
City-St-Zip: MIAMI, FL 33176

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: EDITH OCHOA

PD

04/14/2009

Electronic Signature of Signing Officer or Director

Date