

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Sep 25, 2005  
Secretary of State**

DOCUMENT# P03000074942

Entity Name: ATC ATLANTIC CORPORATION

**Current Principal Place of Business:**

2975 NW 106TH AVENUE APT 4  
SUNRISE, FL 333221045

**New Principal Place of Business:**

**Current Mailing Address:**

2975 NW 106TH AVENUE APT 4  
SUNRISE, FL 333221045

**New Mailing Address:**

FEI Number: 54-2115444      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TORRES, LENA  
2975 NW 106TH AVENUE APT 4  
SUNRISE, FL 333221045 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: LENA TORRES

\_\_\_\_\_  
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: P ( ) Delete  
Name: TORRES, ARNALDO  
Address: 2975 NW 106TH AVENUE APT 4  
City-St-Zip: SUNRISE, FL 333221045

Title: V ( ) Delete  
Name: TORRES, LENA  
Address: 2975 NW 106TH AVENUE APT 4  
City-St-Zip: SUNRISE, FL 333221045

**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: ARNALDO TORRES

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

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09/25/2005

\_\_\_\_\_  
Date