

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030941

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: ATLANTIC MARINE TRADE, INC.

## Current Principal Place of Business:

543 EAST 11TH AVE  
MOUNT DORA, FL 32757 US

## New Principal Place of Business:

## Current Mailing Address:

543 EAST 11TH AVE  
MOUNT DORA, FL 32757 US

## New Mailing Address:

FEI Number: 74-3114977      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAETTA, ALFONSO  
543 EAST 11TH AVE  
MOUNT DORA, FL 32757 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: SAETTA, ALFONSO  
Address: 934 SE 9TH AVE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP ( ) Delete  
Name: FERRAZZO, MAUREZIO  
Address: 4 VIALE PARCO NOCE #11  
City-St-Zip: NAPOLI, ITALY, 80014

Title: T ( ) Delete  
Name: SAETTA, ANNETTE  
Address: 543 EAST 11TH AVE  
City-St-Zip: MOUNT DORA, FL 32757 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SAETTA, ALFONSO  
Address: 543 EAST 11TH AVE  
City-St-Zip: MOUNT DORA, FL 32757

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: ALFONSO SAETTA

P

04/14/2009

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

\_\_\_\_\_  
Date