

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000046213

FILED  
Feb 10, 2006  
Secretary of State

Entity Name: ATLANTIC MARINE MAINTENANCE, INC.

## Current Principal Place of Business:

1331 S. KILLIAN DR.  
#F  
LAKE PARK, FL 33403 US

## New Principal Place of Business:

1320 S. KILLIAN DR.  
LAKE PARK, FL 33403 US

## Current Mailing Address:

P O BOX 32968  
PALM BEACH GARDENS, FL 33420 US

## New Mailing Address:

P O BOX 30608  
PALM BEACH GARDENS, FL 33420 US

FEI Number: 20-0871893

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VOGELL, FREDERICK W  
11223 MONET TERRACE  
PALM BEACH GARDENS, FL 33410 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: D ( ) Delete  
Name: VOGELL, FREDERICK W  
Address: P O BOX 32968  
City-St-Zip: PALM BEACH GARDENS, FL 334202968

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: VOGELL, FREDERICK W  
Address: P O BOX 30608  
City-St-Zip: PALM BEACH GARDENS, FL 334202968

I hereby certify that the information supplied with this filing does not qualify for the 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: FREDERICK VOGELL

D

02/10/2006

Electronic Signature of Signing Officer or Director

Date