

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000116104

**FILED**  
**Jan 20, 2012**  
**Secretary of State**

**Entity Name:** ATLANTIC INTER IMP. EXP. CORP.

**Current Principal Place of Business:**

6949 ABBOT AVENUE # 14  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

100 LINCOLN RD  
SUITE 925  
MIAMI BEACH, FL 33139 US

**Current Mailing Address:**

P.O. BOX 2205  
MIAMI BEACH, FL 33119 US

**New Mailing Address:**

100 LINCOLN RD  
SUITE 925  
MIAMI BEACH, FL 33139 US

**FEI Number:** 20-5522783

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARAUJO, OCTAVIO P  
6949 ABBOT AVENUE # 14  
MIAMI BEACH, FL 33141 US

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

ARAUJO, OCTAVIO P  
100 LINCOLN RD  
SUITE 925  
MIAMI BEACH, FL 33139 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:** OCTAVIO P ARAUJO

01/20/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ARAUJO, OCTAVIO P  
**Address:** 100 LINCOLN RD - SUITE 925  
**City-St-Zip:** MIAMI BEACH, FL 33139 US

I hereby 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 all other like empowered.

**SIGNATURE:** OCTAVIO P ARAUJO

P

01/20/2012

Electronic Signature of Signing Officer or Director

Date