

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000078124

Entity Name: ATLANTIC CAR CARE, INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

1801 W ATLANTIC AVE.
BAY C 1
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

1801 W ATLANTIC AVE.
BAY C 1
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 26-0498424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORENSHTEYN, SOLOMON
4049 CEDAR CREEK RANCH CIRCLE
LAKE WORTH, FL 33467 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: ORENSHTEYN, SOLOMON
Address: 4049 CEDAR CREEK RANCH CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: VP () Delete
Name: MODEL, MATTHEW C
Address: 5700 NW 2ND AVE STE 610
City-St-Zip: BOCA RATON, FL 33487

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 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: SOLOMON ORENSHTEYN

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date