

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000114613

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: ATLANTIC WHOLESALERS OF MIAMI INC.

**Current Principal Place of Business:**

18976 N.E 4TH COURT  
MIAMI, FL 33179

**New Principal Place of Business:**

**Current Mailing Address:**

19300 N.E 23RD AVE  
AVENTURA, FL 33180

**New Mailing Address:**

FEI Number: 68-0662225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLEISCHMAN, MICHAEL  
19300 N.E 23RD AVE  
AVENTURA, FL 33180 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: FLEISCHMAN, MICHAEL  
Address: 19300 N.E 23 AVE  
City-St-Zip: AVENTURA, FL 33180

Title: V.P (X) Delete  
Name: VELASCO, ANDRES  
Address: 3530 MYSTIC POINTE DR. UNIT # 1404  
City-St-Zip: AVENTURA, FL 33180

Title: TR (X) Delete  
Name: TAL, VARDA  
Address: 3530 MYSTIC POINTE DR. UNIT # 1404  
City-St-Zip: AVENTURA, FL 33180

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL FLEISCHMAN

P

01/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date