

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000067169

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** ATOMIC STORM PICTURES INC.

**Current Principal Place of Business:**

4281 EXPRESS LANE  
SUITE L2665  
SARASOTA, FL 34238

**New Principal Place of Business:**

2272 AIRPORT RD. S  
SUITE 201  
NAPLES, FL 34112

**Current Mailing Address:**

4281 EXPRESS LANE  
SUITE L2665  
SARASOTA, FL 34238

**New Mailing Address:**

2272 AIRPORT RD. S  
SUITE 201  
NAPLES, FL 34112

**FEI Number:** 45-3245532

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

U.S. CET CORPORATION  
C/O G.R.WOITZIK, P.A.  
9000 GULF SHORE DRIVE  
NAPLES, FL 34108 US

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

MYUSCORP  
C/O PATRICK VENZKE  
1455 ATLANTIC BLVD., NEPTUNE BEACH  
JACKSONVILLE, FL 32266 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: PATRICK VENZKE

03/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: GUNDERMANN, THOMAS  
Address: MARKGRAFENSTRASSE 2/9  
City-St-Zip: SCHWETZINGEN, XX 68723 DE

Title: S  
Name: BECKER, LEONHARD  
Address: C/O MYUSCORP, 2272 AIRPORT RD S, # 210  
City-St-Zip: NAPLES, FL 34112 US

Title: VP  
Name: OBEL, STEFAN  
Address: FRIEDRICHSSTRASSE 40/OG  
City-St-Zip: SCHWETZINGEN, XX 68723 DE

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: THOMAS GUNDERMANN

DPT

03/29/2012

Electronic Signature of Signing Officer or Director

Date