

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000006112

Entity Name: ATLANTIC DONUTS, INC.

FILED  
Oct 20, 2004  
Secretary of State

**Current Principal Place of Business:**

10379 ATLANTIC BLVD  
JACKSONVILLE, FL

**New Principal Place of Business:**

**Current Mailing Address:**

10379 ATLANTIC BLVD  
JACKSONVILLE, FL

**New Mailing Address:**

FEI Number: 59-3221976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAFUA, FERNANDO  
10379 ATLANTIC BLVD  
JACKSONVILLE, FL 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: CAFUA, FERNANDO  
Address: 84 CASTLEMERE PL  
City-St-Zip: N ANDOVER, MA

Title: S ( ) Delete  
Name: COSTA, LUIS  
Address: 11110 ATLANTIC BLVD #1416  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: COSTA, LUDOVINA  
Address: 11110 ATLANTIC BLVD #1416  
City-St-Zip: JACKSONVILLE, FL

**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 for the exemption stated in Section 119.07(3)(i), 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: LUIS COSTA

S

10/20/2004

Electronic Signature of Signing Officer or Director

Date