## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000051613 (4)

ATLANTIC CHINA, INC.

FILED
Apr 13 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address					
7471 NW 57		7471 NW 57 ST	ŭ		
TAMARAC FL	33319	TAMARAC FL 33319	TAMARAC FL 33319		DO NOT WEST IN THE CO. LOT
US		US	U\$		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
					07/03/1995
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			U S 58-0606060 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			SR 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Stat	e	Cily & State			Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Count		8. This corporation owes or has paid the current year Intangible
24	25]	29 30			Personal Property Tax due June 30. Yes No
414	9. Name and Address of Curre	nt Hegistered Agent	8	1 Name	10. Name and Address of New Registered Agent
	AIS, ANN		ľ	Name	
	05 NORTHWEST 57TH STREET		82 Street Ac		ddress (P.O. Box Number is Not Acceptable)
IA	MARAC FL 33319		  -	_	
				"	
			8	4 City	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or prefed name of regulated agent and billed approache (NOTE: Registered Agent signature required when reinstating) DATE					
			Registered A	igent signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DIFFICENS AF	DELETE	1.1 1111	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	AIMIS, PAUL		1.2 NAM		
STREET ADDRESS	11707 GREEN BRIER LANE			ET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY		
TITLE			2.1 TITLE		Change Addition
NAME	AIMIS, ANN		2.2 NAM	ε	
STREET ADDRESS	11707 GREEN BRIER LANE		2.3 STRE	ET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33071		2. 4 CITY - ST - ZIP		
TITLE			3.1 TITLE		Change Addition
NAME			3.2 NAM	E	
STREET ADDRESS	ADDRESS		3.3 STRE	ET ADDRESS	
CITY-ST-ZIP			3.4. CITY	- ST - ZIP	
TITLE	DELETE 4.1		4.1 TITLE		Change Addition
NAME			4. 2 NAN	IE	
STREET ADDRESS			4.3 STRE	ET ADDRESS	
CITY-ST-ZIP				- ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAM		
STREET ADDRESS			5.3 STRE	ET ADDRESS	İ
CITY-ST-ZIP			5.4 CITY		
TITLE		[] DELETE	61 TITLE		Change Addition
NAME			6.2 NAM	i	
STREET ADDRESS				ET AODRESS	,
CITY-ST-ZIP		100 to 1 100 to 1	6.4 CITY		
14. I hereby of	certify that the information supplied v	with this filing does not qualify to	r the exem urete and '	ption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information

or mis annual report or suppremental annual report as true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or trustee empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

4-7-98 954-720-4559