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 # P95000087802 (1)

THE ATLANTIC ORGANIZATION, INC.

FILED Apr 14 1998 8:00am Secretary of State



911

	4 5 , 1444						
Principal Place		Mailing Address					
6290 NW 27TH WAY 6290 NW 27TH WAY FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309							
FORT ERODE	UNITE IT SOME	TOTAL ENODERDACE	1 1 00000		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 11/15/1995		
·	ace of Business	2a. Mailing Address			4. FEI Number	·····	pplied For
21		26		65-0631550		ot Applicable	
Suite, Apt. #, etc.		Suita, Apt #, etc.		5. Certificate of Status Dosired	\$8.75 Additional Fee Required		
City & State		City & State	⊢ı ′		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23		[26]		Trust Fund Contribution			
Zip	Country	Zip :::1	Countr	У	 This corporation owes or has paid the of Personal Property Tax due June 30. 		itangible No
24	9. Name and Address of Curr	29 ent Registered Agent	30		10. Name and Address of New Registere		
DE	RLIN, LOUIS	on negistered Agent	81	I Name			
			L				
6290 NW 27TH WAY FORT LAUDERDALE FL 33309				Street Add	dress (P.O. Box Number is Not Acceptable)		
ro	NI DAUDENDALL I'L 33309		83	3			
			84	City	F	E 85 Zip	Code
11 Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida St	tatutes, the above	ve-named cor	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing	its registered
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obt	te of Florida, Such change w	vas authorized b	by the corpora	ation's board of directors. I hereby accept the a	ppointment as	s registered
=	m lanılınar witn, and accept the ob-	iganoris or, section do rosos), I longa Statut				
SIGNATURE	Signature, typed or proded name of registered a	ager Land life if applicable	(NOTE: Registered A	gent signature requ	uired when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PSD	☐ DELE1E	1.1 THLE			Change	Addition
NAME	Berlin, Louis		1.2 NAME				
STREET ADDRESS	6290 NW 27TH WAY		1.3 STRE	T ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 333	309	1.4 CHY-	ST-ZIP			
TITLE	VTD	DELETE	2.1 TITLE			Change	Addition
NAME	MISSIKA, MIKE		2 2 NAME				
STREET ADDRESS	6290 NW 27TH WAY		2.3 STREI	ET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 333	309	2. 4 CITY	- S1 - ZIP			
TITLE		DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	- \$T - ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAM	£			
STREET ADDRESS			4.3 STREE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY				1 1 1 1 1 1 1
TITLE		☐ DELETE				∐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-\$1-Z#P			5.4 CITY				1 4 4 4 9 7
TITLE		☐ DELETE	1			L Change	☐ Addition
NAME			6.2 NAMI				
STREET ADDRESS		\wedge	63 S1RE	ET ADDRESS			
CITY-ST-ZIP		_4/_	6.4 CITY	-ST-7IP			
14. I hereby of indicated officer or	certify that the information supplied on this annual report or suppleme director of the corporation or the re or Block 13 if changed, or or supplement	ntakannual report is true and coviver of trustee em <u>po</u> wers	lify or the exem	ption stated i	in Section 119.07(3)(i), Florida Statutes. I further ture shall have the same legal effect as if made equired by Chapter 607, Florida Statutes; and the	under oath: tr	hat Lam an