

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Brenda B. Martham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 26 1998 8:00 am
Secretary of State

DOCUMENT # P97000016902
1. Corporation Name
ATLANTIC TRADING PARTNERS, INC.

Principal Place of Business Mailing Address
12000 BISCAYNE BLVD # 221
No. MIAMI, FL 33189

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business 2a. Mailing Address
21 12000 BISCAYNE BLVD 26
Suite, Apt. #, etc. 27
221 27
City & State 28
22 MIAMI, FL 28
Zip 29 Country 30
33181 30 FLA

3. Date Incorporated or Qualified

2/98

4. FE Number 65-0742581 Applying For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WAYNE YAGMAN
C/O ATLANTIC TRADING PARTNERS, INC
12000 BISCAYNE BLVD #221
No. MIAMI, FL 33181

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature of officer, agent, or registered agent not required if applicable.

(NOTE: Registered Agent Signature required when following)

DATE

4/23/98

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME WAYNE YAGMAN
STREET ADDRESS 12000 BISCAYNE BLVD #221
CITY-ST-ZIP MIAMI, FL 33181

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ☐ Change ☐ Addition2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☐ Addition3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

500002537255

-05/27/98--01091--042

***150.00

PE
5.22

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date of Filing

0087105