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FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000062613 (9)
1. Corporation Name
ATLANTIC INDUSTRIAL SUPPLY CORP.



Principal Place of Business

2507 NW 72ND AVE
MIAMI FL 33122

Mailing Address

2507 NW 72ND AVE
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 7500 NW 41 ST

Suite, Apt. #, etc.

22 SUITE # 108

City & State

23 MIAMI, FL. 33166

Zip

Country

24

25

2a. Mailing Address

26 7500 NW 41 ST

Suite, Apt. #, etc.

27 SUITE # 108

City & State

28 MIAMI, FL. 33166

Zip

Country

29

30

3. Date Incorporated or Qualified

07/18/1997

4. FEI Number

65-0768053

Applied 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

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

9. Name and Address of Current Registered Agent

ALOM, ALFREDO E
2507 NW 72ND AVE
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name ALOM, ALFREDO E

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

7500 NW 41 ST, SUITE 108

83

84 City

MIAMI

FL

85 Zip Code

33166

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 printed name of registered agent and title if applicable

ALFREDO ALOM

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME D
STREET ADDRESS ALOM, ALFREDO E
CITY-ST-ZIP 2507 NW 72ND AVE
MIAMI FL 33122

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V/T ☒ Change ☐ Addition
1.2 NAME ALFREDO ALOM
1.3 STREET ADDRESS 600 NW 43CT
1.4 CITY-ST-ZIP MIAMI, FL. 33126

2.1 TITLE P ☐ Change ☒ Addition
2.2 NAME JORGE GOMEZ
2.3 STREET ADDRESS 600 NW 43 CT
2.4 CITY-ST-ZIP MIAMI, FL. 33126

3.1 TITLE S ☐ Change ☒ Addition
3.2 NAME ALFREDO IGLESIAS
3.3 STREET ADDRESS 4817 SW 152CT
3.4 CITY-ST-ZIP MIAMI, FL. 33185

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

ALFREDO ALOM

4/22/98

(305) (99-011)

CR2E034 (10/97)