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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # POROLOGERS

FILED Feb 22, 1999 8:00 am Secretary of State 02-22-1999 90097 024 ***150.00

1. Corporation Name				
ATLANTIC ENTERPRISES OF THE TREASURE COAST, INC.				
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Principal Place of Business Mailing Address		- 1 INTRIBUTE OF TOTAL INDIA CONTRACTION OF THE CONTRACT OF TH	IND DIEK NED	81188 4161 1881
1076 WINDING RIVER ROAD 1076 WINDING RIVER ROAD		1		
VERO BEACH FL 32963 VERO BEACH FL 32963				
		DO NOT WRITE IN THIS	SPACE	
		3. Date Incorporated or Qualifed		
		03/20/1998		
2. Principal Place of Business 2a. Mailing Address	. Street	4. FEI Number 165-083 1637	_ 	plied For
21/432 21ST Still 26/1432 21ST	. Shall	62-082-162-1	\$8.75 A	Applicable
Suite, Apt. #, etc. 22 Suite A 27 Suite A		5. Certificate of Status Desired	Fee Re	
City & State City & State VERO Bluch FL 28 VERO Beach	۴L	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	•
Zip Country Zip	Country	8. This corporation owes the current year Inta		
24 3 2960 25 Indian River 29 32960 30	Indian River			□No
Name and Address of Current Registered Agent		10. Name and Address of New Registered	gent	
	81 Name	•		
CALDWELL, WILLIAM W	82 Street Addre	ss (P.O. Box Number is Not Acceptable)	· ····	
756 BEACHLAND BOULEVARD 82 Street		as (F.O. DOX Number is Not Acceptable)		
VERO BEACH FL 32963	83			
	84 City		85 Zip C	`ode
	64 City	FL	21P C	,0de
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the	he above-named corpo	ration submits this statement for the purpose of	changing its	registered
office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida 3	nzed by the corporation Statutes.	n's board of directors, i hereby accept the appoir	unent as reg	jisterea
				}
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent and title if applicable)	stered Agent signature required			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent and title if applicable.) OFFICERS AND DIRECTORS	13.	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN		
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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 attackment with an address, with all other like empowered.