PRO CORPO ANNUAL 19	OW: FILING FEE A OFIT DRATION REPORT 99	FLORIDA DEI Kath Secn DIVISION C	PARTMENT OF STATE erine Harris etary of State OF CORPORATIONS	May 17, Secreta	ILED 1999 8: 1ry of St 90050 040 ***15	ate
	ENT #19800004 IPEALSWIMWE			* ^{>} 554623 ⁻ - 91	005U - 4 U	
Principal Place of E 676 D Fi-LAU	Business W. Kospect Rd INERGALL F1. 33	Mailing Address 67 67 809 FF.MR	6 W. Neosyect R Udweddir, FT. 3.	DO NOT WRITE 3. Date Incorporated or Qualified	E IN THIS SPACE	
				08/07/1998	<i>y</i>	
2. Principal Place	ATTANTICATUS	2a. Mailing Address	ATTANTIC BLUE	4. FEI Number		oplied For
Suite, Apt. #, etc 22		26 // J J . // Suite, Apt. #, etc.	11 17 10 17 C 10 10 L	5. Certifcate of Status Desired		ot Applicable Additional equired
City & State	dendele, Fl.	City & State 28 F. L.	edale, Fl.	Election Campaign Financing Trust Fund Contribution	□ \$5.00 Added	*
Zip 3331	6 25 USA	^{Zip} 33316	Country 30 USA	This corporation owes the currer Personal Property Tax.	nt year Intangible Yes	□No
9.	Name and Address of Current	t Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
676 71	1. PROSPECT Rd		82 Street A	ddress (P.O. Box Number is Not Acceptab	le)	
11. Pursuant to the office or registe	ered agent, or both, in the State o	2 and 607.1508, Florida Sta of Florida. Such change was	83 84 City tutes, the above-named or sauthorized by the corpora	orporation submits this statement for the pration's board of directors. I hereby accept	FL 85 Zip (registered
11. Pursuant to the office or registe agent. I am fan	e provisions of Sections 607.0502	2 and 607.1508, Florida Sta of Florida. Such change was	83 84 City tutes, the above-named or sauthorized by the corpora	orporation submits this statement for the p	FL 85 Zip (registered
11. Pursuant to the office or registe agent. I am fan SIGNATURE	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NO	83 84 City tutes, the above-named or s authorized by the corpora- lorida Statutes.	orporation submits this statement for the pration's board of directors. I hereby accept	FL 85 Zip 0 urpose of changing its the appointment as re	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE Signatu	e provisions of Sections 607 0502 ered agent, or both, in the State on initiar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NO D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12.	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NO	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NO D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NO D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	e and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NO D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	e and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	e and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	e and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or s authorized by the corpora Florida Statutes. DIE: Registered Agent signature required.	orporation submits this statement for the pration's board of directors. I hereby accept	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or authorized by the corpora Florida Statutes. 9TE: Registered Agent signature required: 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	TL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or authorized by the corporation of the corporation o	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	TL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or authorized by the corporation of the corporation o	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	TL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	83 84 City tutes, the above-named or authorized by the corporation of the corporation o	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	TL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	tutes, the above-named or sauthorized by the corpora florida Statutes. TE: Registered Agent signature required in the sig	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered RS IN 12 Addition
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE TITLE	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	tutes, the above-named or sauthorized by the corpora florida Statutes. TE: Registered Agent signature required in the sig	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered RS IN 12 Addition
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	tutes, the above-named of a authorized by the corporal formal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. DTE: Registered Agent signature required in the corporal statutes. D	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered RS IN 12 Addition
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	2 and 607.1508, Florida Sta of Florida. Such change was ions of, Section 607.0505, f and title if applicable. (NC D DIRECTORS	tutes, the above-named or sauthorized by the corporal formal statutes. DIE: Registered Agent signature required in the sauthorized by the corporal formal signature required in the sauthorized by the corporal formal signature required in the sauthorized in the	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered RS IN 12 Addition
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	and 607.1508, Florida Stapf Florida. Such change was ions of, Section 607.0505, for and title if applicable. D DIRECTORS DELETE DELETE	tutes, the above-named or sauthorized by the corporal formation of the corporal statutes. DTE: Registered Agent signature required formation of the corporal formation of the	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered ORS IN 12 Addition Addition
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	and 607.1508, Florida Stapf Florida. Such change was ions of, Section 607.0505, for and title if applicable. D DIRECTORS DELETE DELETE	tutes, the above-named or authorized by the corpora florida Statutes. TE: Registered Agent signature required in the sign	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered ORS IN 12 Addition Addition
11. Pursuant to the office or registe agent. I am fan SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	e provisions of Sections 607 0502 ered agent, or both, in the State onliar with, and accept the obligat	and 607.1508, Florida Stapf Florida. Such change was ions of, Section 607.0505, for and title if applicable. D DIRECTORS DELETE DELETE	83 84 City tutes, the above-named or sauthorized by the corport Florida Statutes. DIE: Registered Agent signature required to the corport of the corport	orporation submits this statement for the praction's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFI	FL 85 Zip 0 urpose of changing its the appointment as re DATE CERS AND DIRECTO Change Change Change	registered gistered ORS IN 12 Addition Addition

CITY-ST-ZIP h this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 iver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the information and the improvement.

State of the control of the con 14. I hereby certify that the infirmation indicated on this annual report of officer or director of the corporal Block 12 or Block 13 if changes.

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

22

23 24

NAME

STREET ADDRESS