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FILE NOW: FILING FEE AFTER MAY 1

2000

FLORIDA ANNUAL REPORT



STATE OF FLORIDA
DIVISION OF CORPORATIONS

DOCUMENT #
P98000101209

Mailing Address
Atlantic International, Inc
100 S Atlantic Ave
Ormond Beach, FL 32176-7755

Principal Place of Business

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, find through internet information and enter correction below.

1. Mailing Address	2a. Principal Place of Business	4. FBI Number	Applied For
	26	59-3545952	Not Applicable
3. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired	8. Election (Foreign Financing):
		SB.75 Additional Fee Required <input type="checkbox"/>	Fund Contribution <input type="checkbox"/>
City & State	28. City & State	7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip	29. Zip	8. This corporation has liability for intangible tax under S. Florida Statutes	99.032. Yes <input type="checkbox"/> No <input type="checkbox"/>

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
William Ho 599 S Atlantic Ave Ormond Beach, FL 32176	81 Name: William Ho 82 Street Address (P.O. Box Number is Not Acceptable): 599 South Atlantic Ave 83 City: Ormond Beach 84 City: 32176 FL 85 Zip/Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0503 or Sections 617.0502 and 617.1504, Florida Statutes, the incorporator/corporation submits this statement for the purpose of changing its registered office or principal office, or both, in the State of Florida. Such change was authorized by the corporation's board of directors and hereby accepted by the incorporator/corporation. I hereby accept the amendments as registered agent and hereby accept the regulations of Section 607.0503 or 617.0503, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 2000	
NAME	Ho, Sarah	11 TITLE	
STREET ADDRESS	599 S Atlantic Ave	12 NAME	
CITY-STATE-ZIP	Ormond Beach, FL 32176	13 STREET ADDRESS	
NAME	Ho, William	14 CITY-STATE-ZIP	
STREET ADDRESS	599 S Atlantic Ave	15 TITLE	
CITY-STATE-ZIP	Ormond Beach, FL 32176	16 NAME	
NAME		17 STREET ADDRESS	
STREET ADDRESS		18 CITY-STATE-ZIP	
CITY-STATE-ZIP		19 TITLE	
NAME		20 NAME	
STREET ADDRESS		21 STREET ADDRESS	
CITY-STATE-ZIP		22 CITY-STATE-ZIP	
NAME		23 TITLE	
STREET ADDRESS		24 NAME	
CITY-STATE-ZIP		25 STREET ADDRESS	
NAME		26 CITY-STATE-ZIP	
STREET ADDRESS		27 TITLE	
CITY-STATE-ZIP		28 NAME	
NAME		29 STREET ADDRESS	
STREET ADDRESS		30 CITY-STATE-ZIP	
CITY-STATE-ZIP		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-STATE-ZIP		34 CITY-STATE-ZIP	
NAME		35 TITLE	
STREET ADDRESS		36 NAME	
CITY-STATE-ZIP		37 STREET ADDRESS	
NAME		38 CITY-STATE-ZIP	
STREET ADDRESS		39 TITLE	
CITY-STATE-ZIP		40 NAME	
NAME		41 STREET ADDRESS	
STREET ADDRESS		42 CITY-STATE-ZIP	
CITY-STATE-ZIP		43 TITLE	
NAME		44 NAME	
STREET ADDRESS		45 STREET ADDRESS	
CITY-STATE-ZIP		46 CITY-STATE-ZIP	
NAME		47 TITLE	
STREET ADDRESS		48 NAME	
CITY-STATE-ZIP		49 STREET ADDRESS	
NAME		50 CITY-STATE-ZIP	

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-00