

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000007647

FILED  
Feb 26, 2005  
Secretary of State

Entity Name: ATLANTIC AQUACULTURE, INC.

## Current Principal Place of Business:

P.O. BOX 143440  
CORAL GABLES, FL 331143440

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 143440  
CORAL GABLES, FL 331143440

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTIN, J. PETER  
11100 SNAPPER CREEK ROAD  
CORAL GABLES, FL 33156 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MARTIN, J. PETER  
Address: P.O. BOX 143440  
City-St-Zip: CORAL GABLES, FL 331143440

Title: VP ( ) Delete  
Name: MARTIN, JACQUELINE D  
Address: PO BOX 143440  
City-St-Zip: MIAMI, FL 331143440

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. PETER MARTIN

PD

02/26/2005

Electronic Signature of Signing Officer or Director

Date