

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90124 002 ***150.00

DOCUMENT # P99000019466
1. Entity Name
ATLANTIC INTERNATIONAL MARKETING GROUP, INC.

Principal Place of Business
300 FIFTH AVENUE SOUTH
SUITE 213
NAPLES FL 34102

Mailing Address
300 FIFTH AVENUE SOUTH
SUITE 213
NAPLES FL 34102



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1004 Collier Center Way
Suite, Apt. #, etc. Suite 204
City & State Naples, FL
Zip 34110 Country USA

3. Mailing Address
1004 Collier Center Way
Suite, Apt. #, etc. Suite 204
City & State Naples, FL
Zip 34110 Country USA

4. FEI Number **65-0902916** **Applied For**
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
WEBER, MARK
300 FIFTH AVENUE SOUTH
SUITE 213
NAPLES FL 34102

7. Name and Address of New Registered Agent
Name Weber, Mark
Street Address (P.O. Box Number is Not Acceptable) 1004 Collier Center Way
Suite 204
City Naples FL Zip Code 34110

8. 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 _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PDC	HOLZHAUSEN, GREG	300 FIFTH AVE., SOUTH, SUITE 213	NAPLES FL 34102	<input type="checkbox"/>
VPD	MARTIN, JULIE	365 FIFTH AVENUE SOUTH, APT. 213	NAPLES FL 34102	<input checked="" type="checkbox"/>
TD	WEBER, MARK	300 FIFTH AVE., SOUTH, SUITE 213	NAPLES FL 34102	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: MARK C WEBER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/02 941-435-1810
 Date Daytime Phone #

CR2E034 (9/01)