

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Minton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S46623** (2)

1. Corporation Name
ATLANTIC TECH SALES, INC.

Principal Place of Business

7411 PANACHE WAY
BOCA RATON FL 33433
US

Principal Address

7411 PANACHE WAY
BOCA RATON FL 33433
US



2. Principal Place of Business

21 Subst. Apt. #, etc.

22 City & State

23 Zip County

24 25

2a. Mailing Address

26 Subst. Apt. #, etc.

27 City & State

28 Zip County

29 30

9. Name and Address of Current Registered Agent

REECK, AMY R.
200 E LAS OLAS BLVD
SUITE 1800
FT LAUDERDALE FL 33301

3. Date of Incorporation or Organization
04/19/1991

3a. Date of Last Report
02/13/1995

4. FEI Number
65-0279783

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes. Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number, if Not Applicable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 190.031 and 190.032, Florida Statutes, I, the undersigned, hereby certify that the information furnished herein is true and correct and that I am the duly authorized officer or registered agent, or both, in the State of Florida. Such certificate was a prerequisite to the incorporation of this corporation for the purpose of changing its registered office location with an effect on the obligations of Sections 190.031 and 190.032, Florida Statutes. I hereby accept the appointment as registered agent. I am

SIGNATURE

12. OFFICERS AND DIRECTORS

FILE	NAME	STREET ADDRESS	CITY-STATE-ZIP	FILE	NAME	STREET ADDRESS	CITY-STATE-ZIP
	D			<input type="checkbox"/>	OFFICER		
	DANIELS, MARTIN	7411 PANACHE WAY	BOCA RATON FL				
				<input type="checkbox"/>	OFFICER		
				<input type="checkbox"/>	OFFICER		
				<input type="checkbox"/>	OFFICER		
				<input type="checkbox"/>	OFFICER		
				<input type="checkbox"/>	OFFICER		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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SIGNATURE: *Martin Daniels*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARTIN DANIELS 4/8/96 407-368-1526

CR2E034 (12/95)