

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V23771

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: ATLANTIC MARKETING SYSTEMS, INC.

## Current Principal Place of Business:

9 ISLAND AVE  
2314  
MIAMI BEACH, FL 33139

## Current Mailing Address:

9 ISLAND AVE  
2314  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

9 ISLAND AVE  
2314  
MIAMI BEACH, FL 33139-136

## New Mailing Address:

9 ISLAND AVE  
2314  
MIAMI BEACH, FL 33139-136

FEI Number: 65-0331710

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KOENIG, JOHN A.  
9 ISLAND AVE  
APT 2314  
MIAMI BEACH, FL 33139 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: T ( ) Delete  
Name: KOENIG, JOHN A.  
Address: 9 ISLAND AVENUE, APT. 2314  
City-St-Zip: MIAMI BEACH, FL

Title: S ( ) Delete  
Name: KOENIG, CYNTHIA B.  
Address: 9 ISLAND AVENUE, APT. 2314  
City-St-Zip: MIAMI BEACH, FL

Title: P ( ) Delete  
Name: KOENIG, STEWART H  
Address: 9 ISLAND AVE., APT. 2314  
City-St-Zip: MIAMI BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: KOENIG, JOHN A.  
Address: 9 ISLAND AVENUE, APT. 2314  
City-St-Zip: MIAMI BEACH, FL 33139

Title: S (X) Change ( ) Addition  
Name: KOENIG, CYNTHIA B.  
Address: 9 ISLAND AVENUE, APT. 2314  
City-St-Zip: MIAMI BEACH, FL 33139

Title: P (X) Change ( ) Addition  
Name: KOENIG, STEWART H  
Address: 9 ISLAND AVE., APT. 2314  
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOHN A. KOENIG

T

04/28/2009

Electronic Signature of Signing Officer or Director

Date