

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

V54452

1. Entity Name

ATLANTICO, INC.

FILED

00 MAY 31 PM 1:45

Principal Place of Business  
701 Washington Ave.  
Suite 400  
Miami Beach, FL 33139

Mailing Address  
701 Washington Ave.  
Suite 400  
Miami Beach, FL 33139

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2. Principal Place of Business  
c/o Trent Merrill

3. Mailing Address  
c/o Trent Merrill

Suite, Apt. #, etc.  
4599 District Boulevard

Suite, Apt. #, etc.  
4599 District Boulevard

City & State  
Vernon, CA 90058

City & State  
Vernon, CA 90058

4. FEI Number  
65-0357427

Applied For  
Not Applicable

Zip  
90058

Country  
USA

Zip  
90058

Country  
USA

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Gene Montesano  
701 Washington Ave.  
Suite 400  
Miami Beach, FL 33139

Name  
Robert E. Gallagher

Street Address (P.O. Box Number is Not Acceptable)

2200 Museum Tower

150 W. Flagler Street

City  
Miami

FL

Zip Code  
33130

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, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
Montesano, Gene  
701 Washington Avenue  
Miami, Beach, FL 33139 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
FD  
Gene Montesano  
4599 District Boulevard  
Vernon, CA 90058 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
Montesano, Gene  
701 Washington Avenue  
Miami Beach, FL 33139 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
700003298977--7  
-06/21/00--01055--013  
\*\*\*\*\*8.75 \*\*\*\*\*8.75 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
Montesano, Arlene  
3250 Mary Street, Suite 400  
Coconut Grove FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
700003298977--7  
-06/21/00--01055--014  
\*\*\*\*\*550.00 \*\*\*\*\*550.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VST  
Trent Merrill  
4599 District Boulevard  
Vernon, CA 90058 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)