


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # V65246	
1. Entity Name ATLANTIC MACHINERY, INC.	

Principal Place of Business 3780 NW 52ND ST MIAMI, FL 33142	Mailing Address 9010 S W 137TH AVE 113 MIAMI, FL 33186 US
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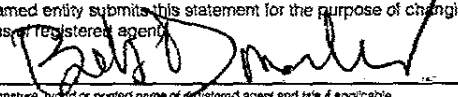
04302004 No Chg-P CR2E034 (10/03)

WRITE IN THIS SPACE

4. FEI Number 65-0357491	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PENA, GERMAN P.A. 9010 SW 137TH AVE SUITE 113 MIAMI, FL 33186

WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating).</small>	

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SOTTO, RICK M. 6825 GLENEAGLE DR. MIAMI LAKES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT DARLOW, ROBERT 11121 SW 121ST ST MIAMI, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000149218 05/03/04-80175-009 150.00
WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.
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SIGNATURE: 	<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>
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