

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000060258

**Entity Name:** ATA-MAN-MGT, INC.

**Current Principal Place of Business:**

2045 NORTH BCH RD.  
ENGLEWOOD, FL 34223

**FILED**  
**Apr 02, 2013**  
**Secretary of State**  
**CC3911505141**

**Current Mailing Address:**

2045 NORTH BCH RD.  
ENGLEWOOD, FL 34223 US

**FEI Number: 01-0700118**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JUFFE, FLISCHEL & MURTHA., P.A.  
900 PINE STREET SUITE 126  
ENGLEWOOD, FL 34223 US

*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

**Officer/Director Detail :**

Title PD  
Name ATAMANCHUK, SUSAN M.  
Address 2045 NORTH BCH RD.  
City-State-Zip: ENGLEWOOD FL 34223

Title VTSD  
Name ATAMANCHUK, BARBARA J.  
Address 2045 NORTH BCH RD.  
City-State-Zip: ENGLEWOOD FL 34223

*I hereby 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 all other like empowered.*

**SIGNATURE: SUSAN M. ATAMANCHUK**

**PRESIDENT**

**04/02/2013**

Electronic Signature of Signing Officer/Director Detail

Date