

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000002962

**Entity Name:** LASHES BY PATTY INC

**Current Principal Place of Business:**

631 9TH AVE  
VERO BEACH, FL 32962

**Current Mailing Address:**

631 9TH AVE  
VERO BEACH, FL 32962 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HARRIS, PATRICIA  
631 9TH AVE  
VERO BEACH, FL 32962 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 P  
Name HARRIS, PATRICIA  
Address 631 9TH AVE  
City-State-Zip: VERO BEACH FL 32962

Title SEC  
Name HARRIS, PATRICIA  
Address 631 9TH AVE  
City-State-Zip: VERO BEACH FL 32962

Title TRE  
Name HARRIS, PATRICIA  
Address 631 9TH AVE  
City-State-Zip: VERO BEACH FL 32962

Title DIR  
Name HARRIS, PATRICIA  
Address 631 9TH AVE  
City-State-Zip: VERO BEACH FL 32962

*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:** PATRICIA HARRIS

04/18/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date