

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000725

Entity Name: PATRIOT RECOVERY SERVICES, INC.

Current Principal Place of Business:

401 E. LAS OLAS BLVD.
SUITE 1650
FORT LAUDERDALE, FL 33301

Current Mailing Address:

401 E. LAS OLAS BLVD.
SUITE 1650
FORT LAUDERDALE, FL 33301

FEI Number: 27-4745065

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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 CEO, DIRECTOR
Name MARIANO, STEVEN M
Address 401 E. LAS OLAS BLVD. #1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title S
Name PIZZO, CHRISTOPHER L
Address 401 E. LAS OLAS BLVD. #1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title D
Name SCHUVER, CHARLES
Address 401 E. LAS OLAS BLVD. #1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title VP, ASSISTANT SECRETARY
Name DAVIS, KIMBERLY
Address 401 E. LAS OLAS BLVD. #1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title T
Name SLUKA, MICHAEL J
Address 401 E. LAS OLAS BLVD. #1650
City-State-Zip: FORT LAUDERDALE FL 33301

Title PRESIDENT, DIRECTOR
Name LINN, JASON
Address 401 E. LAS OLAS BLVD.
SUITE 1650
City-State-Zip: FORT LAUDERDALE FL 33301

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: KIMBERLY DAVIS

ASSISTANT SECRETARY 02/11/2014

Electronic Signature of Signing Officer/Director Detail

Date