

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 388386

FILED
Mar 22, 2005
Secretary of State

Entity Name: THE PATECELL CORPORATION

Current Principal Place of Business:

3640 AIRPORT ROAD
BLDG. 13, UNIT 2
BOCA RATON, FL 334316436 US

New Principal Place of Business:

5565 NE 29TH AVE
FT LAUDERDALE, FL 33308

Current Mailing Address:

3640 AIRPORT ROAD
BLDG. 13, UNIT 2
BOCA RATON, FL 334316436 US

New Mailing Address:

5565 NE 29TH AVE
FT LAUDERDALE, FL 33308

FEI Number: 59-1512992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, DOUGLAS C. & ASSOCIATES
1915 HARRISON ST
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

STEPHEN W GILBERTSON CPA PA
2720 E OAKLAND PARK BLVD #109
FT LAUDERDALE, FL 33306 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: STEPHEN W GILBERTSON CPA

03/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PATECELL, THEODORE C,
Address: 5565 NE 29 AVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: VP (X) Delete
Name: LOVEJOY, SHERRYLYN
Address: 33-52 156TH ST
City-St-Zip: FLUSHING, NY 11354

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: LOVEJOY, SHERRYLYN
Address: 5565 NE 29 AVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: SHERRYLYNN LOVEJOY

PSTD

03/22/2005

Electronic Signature of Signing Officer or Director

Date