



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # F03000005034 1. Entity Name PAT IONADI CORPORATION	
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Principal Place of Business 4615 BUTLER ST. PITTSBURGH, PA 15201	Mailing Address 3033 HARTLEY RD., STE. 2 JACKSONVILLE, FL 32257
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DO NOT WRITE IN THIS SPACE

	
01072008	No Chg-P CR2E034 (11/05)
4. FEI Number 25-1230758	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SERIG, MICHAEL 3033 HARTLEY RD., STE. 2 JACKSONVILLE, FL 32257
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DO NOT 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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	P IONADI, PATRICK 3175 BEECHWOOD DR. ALLISON PARK, PA 15101
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST IONADI, CONSTANCE 3175 BEECHWOOD DR. ALLISON PARK, PA 15101
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<p>U00000790256 01/23/08-80026-020 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered.

SIGNATURE: 	1/16/08 472-60-4496
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #