## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # G66811

PATRICK POWER CORP.

FILED
Feb 06 1997 8:00am
Secretary of State

|--|

Principal Place of Business			Mailing Address				I SOUTKY ENIN ONTO ONTO INTEL NOOR THE DING BIRTH OF DINGS OF OUR DIGHT FOR				
2455 E SUNRISE BLVD			2455 E SUNRISE BLVD								
SUITE 400			TE 400	***							
et. Lauderdi US	ALE FL 33304	FT. US	LAUDERDALE FL 33	304-3107			3. Date Incorporated or Qualifie		ate of Las		<del></del>
							10/27/1983	02	/07/199		
'	Place of Business		Mailing Address				4. FEI Number		ļ	Applied	
1		26	0.4. 4.1.0				59-2339160			Not Ap	<del> </del>
Suite, Apt.	. #, €IG.	27	Suite, Apt #, etc.				5. Certificate of Status Desired			5 Additi Regulre	
City & Stat	te		City & State	<del></del>			6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·		00 May	
]		28					Trust Fund Contribution			ed to Fe	
Zıp	Country		Zıp	Co	untry		8. This corporation has liability t	or intangible	e tax unde	ers. 199	.032
<u> </u>	25	29		30			Florida Statutes	64000	□ No		
	9. Name and Address of Curre	ent Regist	ered Agent		-		10. Name and Address of New	Registered	Agent		
	ES, DONALD R.				81	Name					
	00 EAST OAKLAND PARK BLVD				82	Street Add	ress (P.O. Box Number is Not Accep	table)			
•	ITE 105										
F0	RT LAUDERDALE FL 33306				83						
					84	City			85 2	ip Code	<del></del>
							poration submits this statement for th	FL			
SIGNATURE	am familiar with, and accept the obli- Signature typed or printed name of registered in OFFICERS Al	gent and litte r	applicable (N				lred when reinstating)  ADDITIONS/CHANGES TO OF	DATE	D DIRECT	AI SBO	112
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IAME	GUSTAFSON, R. CHARLES			1	NAME						•
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IAME	PATEL, MAHENDRA H		<u> </u>		VAME						
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NAME	ROSENTHAL, AARON, SR				NAME		•				
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	FT. LAUDERDALE FL	<del></del>				ST-ZIP					
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NAME	DRISCOLL, MARTIN K.		Land December		NAME	1			- J.J.	_	
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NAME	PFORDRESHER, ROBERT	<b>M</b>		•	NAME	i					
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 inchanged, or on an all achment with an address.

**SIGNATURE:** 

1/31/97

Date

954 563-9755

Daytime Phone #