2002 UNIFORM BUSINESS REPORT (UBR)

Feb 12, 2002 8:00 am G66811 DOCUMENT # **Secretary of State** 1. Entity Name PATRICK POWER CORP. 02-12-2002 90058 024 ***150 00 Principal Place of Business Mailing Address 5691 N.E. 14 AVENUE 5691 N.E. 14 AVENUE FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334 บร 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2339160 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NILES, CHRISTOPHER D Street Address (P.O. Box Number is Not Acceptable) 2601 E. OAKLAND PARK BLVD. SUITE 400 FORT LAUDERDALE FL 33306 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. (9/01)TITLE ☐ Delete TITLE ☐ Change ☐ Addition DRISCOLL, JAMES NAME NAME STREET ADDRESS 5691 N.E. 14 AVENUE CR2E034 STREET ADDRESS FORT LAUDERDALE FL 33334 CITY-ST-ZIP CITY-ST-ZIP DPS TITLE ☐ Delete TITLE Addition DRISCOLL, MARTIN K NAME NAME STREET ADDRESS 5691 N.E. 14 AVENUE STREET ADDRESS FORT LAUDERDALE FL 33334 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition DRISCOLL, MICHAEL J NAME NAME STREET ADDRESS 5691 N.E. 14 AVENUE STREET ADDRESS FORT LAUDERDALE FL 33334 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition DRISCOLL, JOAN C NAME NAME STREET ADDRESS 5691 N.E. 14 AVENUE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33334 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition KIRBY, JOAN DRISCOLL NAME STREET ADDRESS 5691 NE 14TH AVE STREET ADDRESS FORT LAUDERDALE FL 33334 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition ROSENTHAL, AARON NAME 5691 N.E. 14 AVENUE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33334 CITY-ST-ZIP CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

1 Do w Rl SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR RObert W. Buffett, Treasurer

1/28/02 Date

954-491-7745 Ext. 20

Daytime Phone #