

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H06910**

(4)

1. Corporation Name

PATRICIAN ENTERPRISES, INC.

Principal Place of Business

**250 DUNDAS STREET WEST, SUITE 301
TORONTO, ONTARIO
CANADA M5T 2Z1**

Mailing Address

**250 DUNDAS STREET WEST, SUITE 301
TORONTO, ONTARIO
CANADA M5T 2Z1**



2. Principal Place of Business

2a. Mailing Address

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Suite, Apt. #, etc.

Suite, Apt. #, etc.

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City & State

City & State

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Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

**BRACKINS, A.J.
% LEXOW, BRACKINS, KOFFLER
SCHLITZ PROFESSIONAL PLAZA, 321-21ST ST.
VERO BEACH FL 32960**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

3. Date Incorporated or Qualified

06/07/1984

3a. Date of Last Report

03/29/1995

4. FEI Number

59-2419087

Applied For
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.01(1) and 607.15(5), Florida Statutes, the above named corporation subscribes this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby, I accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 607.01(1) Florida Statutes.

SIGNATURE

Signature of Officer or Director

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

12.

TITLE

P

NAME

BAKER, GRAHAM

STREET ADDRESS

**250 DUNDAS ST. WEST, SUITE 301
TORONTO, ONTARIO, CANADA**

CITY-STATE-ZIP

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97. TITLE

98. NAME

99. STREET ADDRESS

100. CITY-STATE-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 10/96

FD-205 (Rev. 8/95)

CR2E034 (12/95)