2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H82234

 Entity Name PATÉK ENTERPRISES, INC.

Principal Place of Business

3100 NW BOCA RATON BLVD

#108

BOCA RATON, FL 33431 US

Mailing Address

3100 NW BOCA RATON BLVD

#108

DO NOT WRITE IN THIS SPACE

BOCA RATON, FL 33431

FILED Feb 28, 2004 08:00 AM Secretary of State



02262004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2591457

Applied For Not Applicable

\$8.75 Additional Fee Required

5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

PATEK, ROBERT C. 4217 S OCEAN BLVD HIGHLAND BCH, FL 33487

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 Signature, typed or printed name of registered agent and little if applicable. "" (NOTE Registered Agent algorithms when reinstating) TATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	U00000071118 03/01/04-80057-022 150.00
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY ST-ZIP	PTSD PATEK, ROBERT C. 4217 S OCEAN BLVD HIGHLAND BCH, FL 33487	· · · · · · · · · · · · · · · · · · ·		·	·
TRILE NAME STREET ADDRESS CITY - ST-ZIP					
HILE NAME STREET ADDRESC CHY-ST-ZIP	_		DO NOT WRITE IN THIS SPACE		
HTLE NAME STREET ADDRESS CITY-SI-ZIP					
STEE NAME STREET ADDRESS CRY-ST-ZIP					

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, Truther 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 outh, 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:

NAME STREET ADDRESS City - St - ZiP