

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # J48853

1. Entity Name  
CORNER POCKET BILLIARDS OF FLORIDA, INC.



FILED

06 AUG -4 PM 2:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
9318B-10 E COLONIAL DR  
ORLANDO, FL 32817

Mailing Address  
9318B-10 E COLONIAL DR  
ORLANDO, FL 32817

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07282006

Chg-P

CR2E034 (11/05)

4. FEI Number

59-2753602

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DRISCOLL, RONALD B.  
1341 SILVER LAKE CT  
SANFORD, FL 32773

7. Name and Address of New Registered Agent

Name  
Kuntesh Patel

Street Address (P.O. Box Number is Not Acceptable)  
9318 E. Colonial Drive, Suite B-10

City  
Orlando, FL Zip Code  
32817

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

*Kuntesh Patel*

President

August 1, 2006

Signature typed as per name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
DRISCOLL, RONALD B.  
1341 SILVER LAKE CT  
SANFORD, FL 32773 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
DRISCOLL, MELITTA  
1341 SILVER LAKE CT  
SANFORD, FL 32773 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P,D,S,T,VP  
Patel, Kuntesh  
1585 Glenhaven Circle  
Ocoee, Florida 34761 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
000078524450  
08/09/06--01034--019 \*\*\$1.25

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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:

*Kuntesh Patel*

Kuntesh Patel

August 1, 2006

Date

Daytime Phone #