


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 02, 2004 08:00 AM
Secretary of State

DOCUMENT # K38765 1. Entity Name PATT'S ENTERPRISES OF FLORIDA, INC.	
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Principal Place of Business 821 VANCE CIRCLE NE PALM BAY, FL 32905 US	Mailing Address 821 VANCE CIRCLE NE PALM BAY, FL 32905 US
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DO NOT WRITE IN THIS SPACE



07012004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2633110	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GUIDONE, ANTHONY L.
821 VANCE CIRCLE N E
PALM BAY, FL 32905

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 _____ (NOTE: Registered Agent signature required when re-issuing)

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GUIDONE, ANTHONY C 430 HEATHER AVE, NE PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GUIDONE, PHYLLIS 821 VANCE CIRCLE NE PALM BAY, FL 32905
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RODRIGUEZ, VIVIAN S 1799 MACKLIN ST PALM BAY, FL 32907
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GUIDONE, ANTHONY L 821 VANCE CIRCLE NE PALM BAY, FL 32905
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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07/02/04-80003-018 150.00

12. 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:  **07/01/04** **321-676-4025**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #