


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # K64401

1. Entity Name
PATRICE ENTERPRISES, INC.



Principal Place of Business
**2809 E COMMERCIAL BLVD
 FORT LAUDERDALE, FL 33308**

Mailing Address
**2809 E COMMERCIAL BLVD
 FORT LAUDERDALE, FL 33308**

DO NOT WRITE IN THIS SPACE



01182006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0103691

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CASALE, PATRICIA
 2809 EAST COMMERCIAL BLVD.
 FT. LAUDERDALE, FL**

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's signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

**U00000473296
 03/31/06-80011-005 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD CASALE, PATRICIA 2165 CORAL GARDENS DR. WILTON MANOR, FL 33306
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD CASALE, SANDRA MARIE 2165 CORAL GARDENS DR. WILTON MANOR, FL 33306
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Patricia Casale, Inc* **3/18-06 954-776-0461**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #