2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M01807

FILED Jan 07, 2005 Secretary of State

Entity Name: PATRON ACCOUNTING SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business: 2721 SW 137 AVE 2631 SW 147 AVE MIAMI, FL 33185 US 115 MIAMI, FL 33175 **New Mailing Address: Current Mailing Address:** 13800 SW 8TH STREET #103 MIAMI, FL 33184 US FEI Number: 65-0069610 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PATRON, MINERVA D PRES 1101 SW 139 AVE MIAMI, FL 33184 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PATRON, MINERV A D PRES Name: Name: 1101 SW 139 AVE Address: Address: City-St-Zip: MIAMI, FL 33184 City-St-Zip: Title: Title: () Change () Addition () Delete Name: PATRON, MINERVA D PRES Name: 1101 SW 139 AVE Address: Address: MIAMI, FL 33184 City-St-Zip: City-St-Zip: () Delete Title: Title: VD VP-D (X) Change () Addition PATRON, RICARDO A V-P PATRON, RICARDO A V-PRES Name: Name: 1101 SW 139 AVE 1101 SW 139 AVE Address: Address: City-St-Zip: MIAMI, FL 33184 City-St-Zip: MIAMI, FL 33184 Title: VΡ () Delete Title: VΡ (X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MINERVA D PATRON **PRES** 01/07/2005

LACORRA, ODALIS P

1052 SW 138 PL

MIAMI, FL 33184

Name:

Address:

City-St-Zip:

LACORRA, ODALIS P V-PRES

1052 SW 138 PL

MIAMI, FL 33184