

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 8:00 am
Secretary of State

07-23-2004 90006 018 ***150.00

DOCUMENT # P02000087093

1. Entity Name

PATTI ARCHIBAUD P.A.



Principal Place of Business

~~C/O KELLY & KELLY CPA'S PA~~
2524 NE 21 COURT
FORT LAUDERDALE, FL 33305

Mailing Address

~~C/O KELLY & KELLY CPA'S PA~~
2524 NE 21 COURT
FORT LAUDERDALE, FL 33305

44049583



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07192004

Chg-P

CR2E034 (10/03)

4. FEI Number

52-2371352

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARCHIBAUD, PATTI
~~C/O KELLY & KELLY CPA'S PA~~
2524 NE 21 COURT
FORT LAUDERDALE, FL 33305

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Patti Archibaud

7-20-04

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ARCHIBAUD, PATTI
2524 NE 21 COURT
FORT LAUDERDALE, FL 33305 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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 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 all other like empowered.

SIGNATURE: *Patti Archibaud*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7-20-04

Daytime Phone #

Attachment
Kelly & Kelly
Certified Public Accountants, P.A.

44049583

MEMBERS OF AMERICAN AND FLORIDA INSTITUTES AND NEW MEXICO SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS

JOHN F. KELLY, C.P.A.
ELIZABETH M. KELLY, C.P.A.
kellyandkelly.com

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FORT LAUDERDALE, FLORIDA 33306-1417
cpakelly@bellsouth.net

PO2000087093

July 20, 2004

Florida Secretary of State
Division Of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Ref: Patti Archibaud PA

Dear Sirs:

Enclosed is a check for \$150.00 to renew the above corporation for 2004. Please note that the client never received the postcard renewal request. Please accept the \$150.00 renewal for 2004 to keep this corporation in good standing with you. Thank you for your understanding.

Sincerely yours,



Elizabeth M Kelly CPA