

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000133481</b>			
1. Entity Name <b>JOHN.PATELLIS, INC.</b>		OFFICERS AND DIRECTORS	
Principal Place of Business <b>9833 SIR FREDRICK STREET TAMPA, FL 33637</b>		Mailing Address <b>9833 SIR FREDRICK STREET TAMPA, FL 33637</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		<div style="text-align: center;"> </div> <div style="display: flex; justify-content: space-between; font-size: small;"> <span>04132007</span> <span>No Chg-P</span> <span>CR2E034 (11/05)</span> </div>	
4. FEI Number <b>55-0851116</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>PATELLIS, JOHN M 9833 SIR FREDRICK STREET TAMPA, FL 33637</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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 <u><i>John Patellis</i></u> <small>Signature, typed or printed name of registered agent and title if applicable</small>		DATE <u>3-21-07</u> <small>DATE</small>	
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>			
TITLE	P	<div style="font-size: small;">           U000000733318            05/09/07-80081-006 150.00         </div> <div style="font-size: 2em; margin-top: 20px;"> <b>DO NOT WRITE IN THIS SPACE</b> </div>	
NAME	PATELLIS, JOHN M		
STREET ADDRESS	9833 SIR FREDRICK STREET		
CITY-ST-ZIP	TAMPA, FL 33637		
TITLE	V		
NAME	WILLEY, MARTIN		
STREET ADDRESS	9833 SIR FREDRICK STREET		
CITY-ST-ZIP	TAMPA, FL 33637		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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: <u><i>John Patellis</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE <u>3-21-07</u> <small>Date</small>	