

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040446

Entity Name: PATOGIU, INC.

FILED  
Apr 28, 2008  
Secretary of State

**Current Principal Place of Business:**

1201 BARRET ROAD  
1205  
NORTH FORT MYERS, FL 33903 US

**New Principal Place of Business:**

**Current Mailing Address:**

1201 BARRET ROAD  
1205  
NORTH FORT MYERS, FL 33903 US

**New Mailing Address:**

FEI Number: 20-0819868      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SILVA, ANTONIO  
1201 BARRET ROAD  
1205  
NORTH FORT MYERS, FL 33903 US

**Name and Address of New Registered Agent:**

SILVA, ANTONIO  
637 NE 4TH TERRACE  
CAPE CORAL, FL 33909 US

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: \_\_\_\_\_ 04/28/2008  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SILVA, ANTONIO  
Address: 1201 BARRET ROAD # 1205  
City-St-Zip: NORTH FORT MYERS, FL 33903 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SILVA, ANTONIO  
Address: 637 NE 4TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33909 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: ANTONIO SILVA      P      04/28/2008  
Electronic Signature of Signing Officer or Director      Date