



**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 01, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000047118</b>		
1. Entity Name PATRICIA INVESTMENTS, INC.		
Principal Place of Business 71 GRIZZLY BEAR PATH ORMOND BEACH, FL 32174-2981	Mailing Address 71 GRIZZLY BEAR PATH ORMOND BEACH, FL 32174-2981	
<b>DO NOT WRITE IN THIS SPACE</b>		
		01082007 No Chg-P CR2E034 (11/05)
		4. FEI Number 20-1001780
		Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent  SHALETT, CHARLES 71 GRIZZLY BEAR PATH ORMOND BEACH, FL 32174-2981		<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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
<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"/> \$5.00 May Be Added to Fees
<b>10. OFFICERS AND DIRECTORS</b>		<b>DO NOT WRITE IN THIS SPACE</b>  000000615984 02/07/07-80010-002 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD POLLIO, PATRICK 814 ELIZABETH ST RIDGEFIELD, NJ 07657	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SEARFOSS, FRANK 814 ELIZABETH ST RIDGEFIELD, NJ 07657	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHALETT, CHARLES 71 GRIZZLY BEAR PATH ORMOND BEACH, FL 321742981	
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: <i>Patrick Pollio</i> 1/27/07 President		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>