2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162690

Entity Name: PARTY PATROL, INC.

Title:

Name:

Address:

City-St-Zip:

FILED May 04, 2005 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
2268 SANE TALLAHAS	OPIPER ST SSEE, FL 32303	3 US			
Current Ma	ailing Address	:	New Maili	ing Address:	
2268 SANE TALLAHAS	DPIPER ST SSEE, FL 32303	3 US	P.O. BOX (TALLAHAS	20987 SSEE, FL 32316 US	
FEI Number:	20-1951225	FEI Number Applied For ()	FEI Number Not Appl	Dlicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:	
NICK, ADAM 2268 SANDPIPER ST TALLAHASSEE, FL 32303 US			324 MAYO	NICK, ADAM J 324 MAYO ST TALLAHASSEE, FL 32304 US	
The above in the State		ıbmits this statement for the pu	ırpose of changing i	its registered office or registered agent, or both,	
SIGNATURE: ADAM NICK				05/04/2005	
	Electronic	Signature of Registered Ager	nt	Date	
		2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notic	ce.	
OFFICERS	S AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () C SAUER, JASON 324 MAYO ST TALLAHASSEE, F	elete FL 32304 US	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	VP () E NICK, ADAM 2268 SANDPIPER TALLAHASSEE, F		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition NICK, ADAM J 324 MAYO ST TALLAHASSEE, FL 32304 US	
Title: Name: Address: City-St-Zip:	T () E NICK, ADAM 2268 SANDPIPEI TALLAHASSEE, F		Title: Name: Address: Citv-St-Zip:	T (X) Change () Addition NICK, ADAM J 324 MAYO ST TALLAHASSEE, FL 32304 US	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ADAM NICK VP 05/04/2005

() Delete

TALLAHASSEE, FL 32303 US

SMITH, ROB

2268 SANDPIPER ST

() Change () Addition