

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000042793

Entity Name: PASTIS PARTNERS INC.

FILED  
Apr 29, 2008  
Secretary of State

## Current Principal Place of Business:

1500 SAN REMO AVENUE  
SUITE 199  
CORAL GABLES, FL 33146 US

## Current Mailing Address:

1500 SAN REMO AVENUE SUITE 248  
CORAL GABLES, FL 33146

## New Principal Place of Business:

1825 PONCE DE LEON BOULEVARD  
#240  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 20-2587967      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARED & ASSOCIATES, P.A.  
1500 SAN REMO AVENUE  
SUITE 248  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GADEA, PHILIPPE  
Address: 1500 SAN REMO AV #199  
City-St-Zip: CORAL GABLES, FL 33146 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GADEA, PHILIPPE  
Address: 1825 PONCE DE LEON BOULEVARD #240  
City-St-Zip: CORAL GABLES, FL 33134 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: PHILIPPE GADEA

P

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date