FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000004213 (3)

1. Corporate Name
PATRIOTIC SOLUTIONS, INC.

Principal Place of Business
8001 E SHANNON COURT
INVERNESS FL 34450

Mailing Address
8001 E SHANNON COURT
INVERNESS FL 34450

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/20/1993
3a. Date of Last Report: 07/05/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26

Suite, Apt. #, etc. — 22 / 27

City & State — 23 / 28

ST — 24 / County — 25 / Zip — 29 / County — 30

4. FEI Number: 59-3163106 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

6. This corporation has [illegible] tax under § 159.832, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

RUBIN, MICHAEL
8001 E SHANNON COURT
INVERNESS FL 34450

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [illegible] DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	P	11 TITLE	☑ Change ☐ Addition
12 NAME	GREEN, DUANE	12 NAME	
13 STREET ADDRESS	POST OFFICE BOX 123	13 STREET ADDRESS	Delete
14 CITY ST ZIP	HERNANDO FL	14 CITY ST ZIP	
21 TITLE	CEO	21 TITLE	☐ Change ☐ Addition
22 NAME	ZIEBARTH, STEPHEN R.	22 NAME	
23 STREET ADDRESS	1817 KIMBERLY TERRACE	23 STREET ADDRESS	
24 CITY ST ZIP	INVERNESS FL	24 CITY ST ZIP	
31 TITLE	ST	31 TITLE	☐ Change ☐ Addition
32 NAME	RUBIN, KARLA J.	32 NAME	
33 STREET ADDRESS	8001 E SHANNON COURT	33 STREET ADDRESS	
34 CITY ST ZIP	INVERNESS FL	34 CITY ST ZIP	
41 TITLE	P	41 TITLE	☐ Change ☐ Addition
42 NAME	RUBIN, KARLA J.	42 NAME	
43 STREET ADDRESS	8001 E. SHANNON COURT	43 STREET ADDRESS	
44 CITY ST ZIP	INVERNESS FL	44 CITY ST ZIP	
51 TITLE		51 TITLE	☐ Change ☒ Addition
52 NAME		52 NAME	VICE PRESIDENT
53 STREET ADDRESS		53 STREET ADDRESS	Michael D. Rubin
54 CITY ST ZIP		54 CITY ST ZIP	8001 E. Shannon Ct.
61 TITLE		61 TITLE	Inverness, FL 34450
62 NAME		62 NAME	☐ Change ☐ Addition
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY ST ZIP		64 CITY ST ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or added to the report or on an attachment with an address.

SIGNATURE: Karla J. Rubin, President — 4-30-95 — 904-637-4108
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
KARLA J. RUBIN

0352457 CP