

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Jul 22, 1999 8:00 am**  
**Secretary of State**  
07-22-1999 90004 008 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000028004

1. Corporation Name  
PAR FOR PATS, INC.



Principal Place of Business  
2424-A E. LAS OLAS BLVD.  
FT. LAUDERDALE FL 33301  
US

Mailing Address  
2530 NE 24TH STREET  
FT. LAUDERDALE FL 33305  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

2a. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Date Incorporated or Qualified  
04/05/1995

4. FEI Number  
65-0572691

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

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

8. This corporation owes the current year Intangible Personal Property.  
Yes No

9. Name and Address of Current Registered Agent  
PATEL, ASHOK M  
2530 NE 24TH ST.WY  
FT LAUDERDALE FL 33305

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

11. Pursuant to the provisions of sections 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: *Ashok M Patel* A.M. PATEL  
(NOTE: Registered Agent signature required when reinstating)  
DATE: 7/19/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P	PATEL, ASHOK M	2530 NE 24 ST	FT. LAUD FL 33305
S	PATEL, KIRTI A	2530 NE 24 ST	FT LAUDBEACH FL 33305

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
2.1 TITLE <td>2.2 NAME</td> <td>2.3 STREET ADDRESS</td> <td>2.4 CITY-ST-ZIP</td>	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
3.1 TITLE <td>3.2 NAME</td> <td>3.3 STREET ADDRESS</td> <td>3.4 CITY-ST-ZIP</td>	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
4.1 TITLE <td>4.2 NAME</td> <td>4.3 STREET ADDRESS</td> <td>4.4 CITY-ST-ZIP</td>	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
5.1 TITLE <td>5.2 NAME</td> <td>5.3 STREET ADDRESS</td> <td>5.4 CITY-ST-ZIP</td>	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
6.1 TITLE <td>6.2 NAME</td> <td>6.3 STREET ADDRESS</td> <td>6.4 CITY-ST-ZIP</td>	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 on an attachment with an address.

SIGNATURE: *Ashok M Patel* 7/19/99 954-522 2424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date Daytime Phone #

CR2E034 (5/99)

PAT'S BEER & WINE  
2424A E. LAS OLAS BLVD.  
FT. LAUDERDALE, FL 33301

TO, FLORIDA DEPT OF STATE.  
DIVISION OF CORPORATIONS  
TALLAHASSEE  
FL 323021500.

JULY 19<sup>th</sup> 1999  
593352-90004-8  
P95000028004

Ref: NOS P95000028004 \$ P9800008835.1

Dear Sir / madam

As per my telephone call of Friday, I tend your  
Office that I did not get my first reminder on both the  
corporation as we have problem with the mail

Also I had to go to London to attend  
my mother's ~~Funeral~~ Death and look after my Father  
to arrange the cremation of my mother.

Please enclosed are 2 cheques as  
per your office advice enclosed is \$300.00 total  
for 2 corporation

Thanking you.

Yours.

Ambatel.  
President.