

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000057420

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** PAT'S HEARING AID LABS, INC.

**Current Principal Place of Business:**

2209 N HERCULES AVE  
CLEARWATER, FL 33763

**New Principal Place of Business:**

**Current Mailing Address:**

2209 N HERCULES AVE  
CLEARWATER, FL 33763

**New Mailing Address:**

**FEI Number:** 59-3351220

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MATTATALL, PAT  
2209 N HERCULES AVE  
CLEARWATER, FL 34623 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MATTATALL, PAT  
Address: 2209 N HERCULES AVE  
City-St-Zip: CLEARWATER, FL 33763

I hereby 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 all other like empowered.

SIGNATURE: PAT MATTATALL

PRES

03/02/2011

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

\_\_\_\_\_ Date