FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P

1998

P95000058906 (5)

PATNICK'S, INC.

FILED Apr 02 1998 8:00am Secretary of State

<u></u>						
Principal Place of Business Mailing Address					I ERBIIDDI IIU IBIBI BIRIH DDIII ADAII ABARA DDIIUL BR	TIBL LOTTO TETLE OUTEN DITT 1881
2865 NO. FO HERNANDO F	2665 NO. FOREST RIDGE HERNANDO FL 34442					
					DO NOT WRITE IN THIS 3. Date incorporated or Qualified	SPACE
					07/28/1995	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26					59-3332145	Not Applicable
		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27					S. Certificate of Status Desired	Fee Required
City & State		City & State	¬ '		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country Z _{IP} Co		Countr	·	Trust Fund Contribution	Added to Fees
24	25	 	30		This corporation owes or has paid the corporation owes or has paid the corporation.	urrent year intangible
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	
GEROGIANNIS, PATRICIA				Name		
2665 NO. FOREST RIDGE BLVD.			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
HERNANDO FL 34442			•	Siree(Addit	ess (1.0. Dox 140/100/15 140/ Acceptable)	
			83			
			84	City		85 Zip Code
				•	FI	L '
11. Pursuant office or	to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607.1508, Florida Statute: of Florida: Such change was at	s, the abov uthorized b	e-named corp v the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its registered
agent. La	m familiar with, and accept the oblig	ations of, Section 607.0505, Flor	ida Statute	S.		politicon de l'egiotorea
SIGNATURE	Signature, typed or printed name of registered ag-	col and tile II analysably (MOTS	Qualitated 46		ad when reinstating) DATE	
12.		D DIRECTORS	13.	aur aignatura reduis	ADDITIONS/CHANGES TO OFFICERS AN	JD DIRECTORS IN 12
TOLE	0	☐ DELETE	1.1 TITLE			Change Addition
NAME	E GEROGIANNIS, PATRICIA		1.2 NAME			
STREET ADDRESS			1.3 STREE	T ADDRESS		
CITY-ST-ZIP	BEVERLY HILLS FL 34465		1.4 CITY-ST-ZIP			
THILE	-		2.1 TITLE			☐ Change ☐ Addition
NAME	GEROGIANNIS, NICK	A.F.	2.2 NAME			
STREET ADDRESS	3061 NO. THORNAPPLE PLA	UE		ADDRESS		
CITY-ST-ZIP	BEVERLY HILLS FL 34465	DELETE	2.4 CITY-ST-ZIP			☐ Change ☐ Addition
NAME	NAMA MANAPAKA		3.1 TITLE 3.2 NAME			Change Addition
STREET ADDRESS	APA IN THAT I BULLON		3.3 STREET	r annress		
CITY-ST-ZIP	DESCRIPTION OF SALES		3.4. CITY -			
TITLE	D	☐ DELETE	4.1 TITLE	<u> </u>		☐ Change ☐ Addition
NAME	FIORE, CARMINE		4. 2 NAME			
STREET ADDRESS	250 W. THISTLE PLACE		4.3 STREET	ADDRESS		
CITY-ST-ZIP	BEVERLY HILLS FL 34465		4.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS	1.33		5.3 STREET			
CITY-ST-ZIP		T DELETE	5.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE			L. Change L. Addition
NAME Street address			6.2 NAME	***************************************		
			6.3 STREET	1		j
CITY-ST-ZIP	certify that the information supplied w	ith this filing does not qualify for	6.4 CiTY-S		Section 119 07/31(i) Florida Statutes I further of	certify that the information

4. 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 attachargent with an address.

SIGNATURE:

3/3/198

HZE034 (10/97)