

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000016451

Entity Name: PATER, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

7790 N.W. 44 STREET
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

7790 N.W. 44 STREET
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 65-0820082

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMARTINO, T
7331 W. ATLANTIC AVE.
DELRAY BEACH, FL 33446 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: DVPS () Delete
Name: DEMARTINO, THEODORA
Address: 7331 W. ATLANTIC AVE.
City-St-Zip: DELRAY BEACH, FL 33446

Title: DP () Delete
Name: SHENKMAN, BRIAN
Address: 10550 PEBBLE COVE LANE
City-St-Zip: BOCA RATON, FL 33498

Title: DT () Delete
Name: PURCHIO, LEONA
Address: 7410 W. BOYNTON BEACH BLVD.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: DS () Delete
Name: SHENKMAN, KENNETH D PH.D
Address: 10550 PEBBLE COVE LANE
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN SHENKMAN

DP

04/28/2005

Electronic Signature of Signing Officer or Director

Date