## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jul 19, 2001 8:00 am DOCUMENT # P99000073472 **Secretary of State** 1. Entity Name 04-13-2001 90009 042 \*\*\*150.00 P.A.T.T., INC. Principal Place of Business Mailing Address 1105 CAPE CORAL PKWY EAST, SUITE C 1105 CAPE CORAL PKWY EAST. SUITE C CAPE CORAL FL 33904 CAPE CORAL FL 33904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number -APPLIED FOR City & State City & State Not Applicable Country Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WRIGHT, CHRISTINE F ESQ. Street Address (P.O. Box Number is Not Acceptable) 1105 CAPE CORAL PKWY EAST, SUITE C CAPE CORAL FL 33904 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Addition CR2E034 (10/00) ☐ Change TITLE ☐ Delete TITLE OLGEMOELLER, GERHARD NAME NAME STREET ADDRESS AUF DER BITZ Y STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SCHENKILBERG, GERMANY 56244 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE TITLE . ☐ Delete NAME NAME STREET ADDRESS CTREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Detete TITLE m.e NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE · Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

FILED

LAW OFFICES OF **SEEMANN & SCHUTT,** Attorneys and Counselors at Law 1105 Cape Coral Parkway East Cape Coral, Florida 33904 Tel.: (941) 540-7007; Telefax (941) 540-2154 e-mail: nauta@peganet.com www.seemannandschutt.com Ernest A. Seemann Darrin R. Schutt \* of Counsel Christine F. Wright \* Admitted in Fl. & Ga. July 16, 2001 **Division of Corporations** P.O. Box 1500

Tallahassee, FL 32302-1500

RE: PATT, Inc.

Dear Sir or Madam:

Enclosed please find the corrected form for the above-referenced corporation. Please excuse the late filing. The form was misplaced in our office and was just located.

If you have any questions, please contact me.

Sincerely,

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