

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT# S21406 1. EntityName PAT'S AUTO SALES, INC.	
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PrincipalPlaceofBusiness 1121 9TH ST. WEST BRADENTON, FL 34205	MailingAddress 1121 9TH ST. WEST BRADENTON, FL 34205
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01192007 NoChg-P CR2E034(11/05)

DO NOT WRITE IN THIS SPACE

4. FEINumber 65-0235945	AppliedFor NotApplicable
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5. CertificateofStatusDesired ☐	\$8.75 Additional FeeRequired
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6. NameandAddressofCurrentRegisteredAgent LAFICA, PATSY V. 1121 9TH ST. WEST BRADENTON, FL 34205
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**DO NOT WRITE
IN THIS SPACE**

8. Theabovenamedentitysubmits thisstatementfor thepurposeofchangingitsregisteredofficeorregisteredagent,orboth, intheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.

SIGNATURE _____ (NOTE:RegisteredAgent'ssignatureisrequiredwhenever installing) _____ DATE _____
Signature,typedorprintednameofregisteredagentandtitleifapplicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

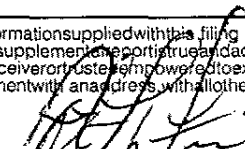
9. ElectionCampaignFinancing TrustFundContribution. ☐	\$5.00 MayBe AddedtoFees
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10. OFFICERSANDDIRECTORS	
TITLE NAME STREETADDRESS CITY-ST-ZIP	PT LAFICA, PATSY V. 1121 9TH ST. WEST BRADENTON, FL
TITLE NAME STREETADDRESS CITY-ST-ZIP	V LAFICA, RONALD 1121 9TH STREET W BRADENTON, FL
TITLE NAME STREETADDRESS CITY-ST-ZIP	S SPRANG, BARBARA J 1121 9TH STREET W BRADENTON, FL
TITLE NAME STREETADDRESS CITY-ST-ZIP	
TITLE NAME STREETADDRESS CITY-ST-ZIP	
TITLE NAME STREETADDRESS CITY-ST-ZIP	

U00000616191
02/07/07-80018-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. Iherebycertifythattheinformationsuppliedwiththis filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicatedonthisreportorsupplementthereofistrueandaccurateandthatmysignatureshallhavethesamelegaleffectas ofthecorporationorthereceiverorthetrusteeempoweredtoexecutethisreportasrequiredbyChapter607,FloridaStatutes;an changed,oronanattachmentwithanaddresswithallotherlikeempowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/07 941-748-844
Date DaytimePhone#