PROFIT CORPORAT ANNUAL RE 1996	TION PORT	FLORIDA DEPARTM Sandra B Secretary DIVISION OF CO	Mortham of State		
OCUMEN	00-00-1	7 (8)			
Corporation Name PATRIOT GR	OUP, INC.			1.140/466 (46.1246 14.46.1346 14.46.1346	
Principal Place of Busine		Mailing Address		1901/040 176 10171 10076 14711 4167	'i 1881 Giðit Bjött Britt Álbit éiðir Brújn ræði
9714-121 STREET N. SEMINOLE FL 34642		9714-121 STREET N. SEMINOLE FL 34642		Date Incorporated or Qualified 3a. Date of Last Report	
				11/27/1991	03/07/1995 Applied For
Principal Place of Bu	rsiness	2a. Mailing Address		4. FEI Number 59-3101429	Not Applicable
Surte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campuign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28	Country	This corporation has liability for	r intangible tax under s 199.032, s 🔲 No
	25 ame and Address of Curren		30	10. Name and Address of New	Registered Agent
Pursuant to the p or registered ager familiar with, and	rovisions of Sections 607,050 nt, or both, in the State of Flor accept the obligations of, Sec	2 and 607, 1508, Florida Statutes ida, Suich change was authorized tion 607,0505, Florida Statutes.	s the above named corporation's box	oration submits this statement for the p and of directors. Thereby accept the ap	purpose of changing its registered off appointment as registered agent. I am
	Typical cripe communical diregistropation		E. Bro, estated Age of Sept. of the footbo	est when repeal duty	DATE DISTORTION OF THE LOCAL COLUMN 12
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FEICERS AND DIRECTORS IN 12 Change
TITLE D	EEKS, JUDY	☐ DEFELE	1 1 TITLE 12 NAME		
CTRCCT ADDRESS 58	49 PARK STREET #308		1.3 STREET ADDRESS		
CITY-ST-ZIP S	. PETERSBURG FL 3370	9 DELETE	14 GHY - ST-ZIP 2 1 THLE		Change Addition
TITLE			2.2 NAME		
NAME STREET ADDRESS			2 3 STREET ACCRESS		
CITY - ST - Z:P		OF:EIE	2.4 CITY - ST - ZIP 3.1 TITLE		Change Additi
TITLE NAME		ب	3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	34 CITY - ST 7/P 4 1 TH. E		Change Addit
TITLE NAME			4.2 NAME		
STREET ADORESS			4 3 STHEET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 C(TY - ST - ZIP 5. 1 TITLE		☐ Change ☐ Add-t
TITLE NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
STITLE THE BALLOS					
CITY-ST-ZIP TITLE		DELETE	54 CHY-ST-ZIP 6 1 MILE		Change Add

63 STREET ADDRESS
64 CITY-S1-2IP

14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 certify 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 attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/94 7/7-698-5352