

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707788

FILED
Apr 01, 2011
Secretary of State

Entity Name: ISLE OF PARADISE "E", INC.

Current Principal Place of Business:

465 PARADISE ISLE BLVD
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

465 PARADISE ISLE BLVD
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 59-1091811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STUBBS, JANE TREAS
465 PARADISE ISLE BLVD.
#307
HALLANDALE BEACH, FL 330095893 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

OFFICERS AND DIRECTORS:

Title: D
Name: ADAMITIS, AL
Address: 465 PARADISE ISLE BLVD. #208
City-St-Zip: HALLANDALE BEACH, FL 330095893

Title: VP
Name: COSTANTINO, CARMINE
Address: 465 PARADISE ISLE BLVD. #108
City-St-Zip: HALLANDALE BEACH, FL 333095893

Title: S/T
Name: STUBBS, JANE
Address: 465 PARADISE ISLE BLVD. #307
City-St-Zip: HALLANDALE BEACH, FL 330095893

Title: D
Name: LARSEN, JOHN
Address: 465 PARADISE ISLE BLVD. #106
City-St-Zip: HALLANDALE BEACH, FL 330095893

Title: P
Name: YENNER, LINDA
Address: 465 PARADISE ISLE BLVD. #308
City-St-Zip: HALLANDALE BEACH, FL 330095893

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JANE STUBBS

S/T

04/01/2011

Electronic Signature of Signing Officer or Director

Date