2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000029381

8245 N.W. 36 STREET

MIAMI, FL 33166

Address: City-St-Zip:

Entity Name: PARADISE GATES & ENTRY SYSTEMS, INC.

FILED Feb 08, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
8245 NW 36TH STREET MIAMI, FL 33166			8245 NW 36TH STRE MIAMI, FL 33166	8245 NW 36TH STREET #7 MIAMI, FL 33166	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
8245 NW 36TH STREET MIAMI, FL 33166			8245 NW 36TH STRE MIAMI, FL 33166	8245 NW 36TH STREET #7 MIAMI, FL 33166	
FEI Number	: 65-0654969	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	, EDWARD 36TH STREET 33166 US				
	named entity s e of Florida.	ubmits this statement for the	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () TRUJILLO, EDV 8245 NW 36TH MIAMI, FL 3310	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () TRUJILLO JR., 8245 N.W. 36 S MIAMI, FL 3316	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () TRUJILLO, AND	Delete REW D	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: EDWARD F. TRUJILLO, SR. PD 02/08/2006