

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR) 2003**

FILED

DOCUMENT # P00000094895
1. Entity Name
PARADISE CONSTRUCTION SP
INC.

03 OCT 17 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03

2. Principal Place of Business
913 OLDBARN RD
Suite, Apt. #, etc.

3. Mailing Address
913 OLDBARN RD
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ORLANDO FL

City & State
ORLANDO FL

Zip
32825 Country
U.S.

Zip
32825 Country
U.S.

4. FEI Number
593673550

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
JUAN PALACIO

Street Address (P.O. Box Number is Not Acceptable)
913 OLDBARN RD

City
ORLANDO FL Zip Code
32825

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] (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1: Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>V.P. D. JUAN PALACIO 913 OLDBARN RD ORLANDO, FL 32825</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>300023908853 10/17/03--01064--018 **150.00</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>P. D. JOHN PALACIO 913 OLDBARN RD ORLANDO, FL 32825</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 10/19/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

PARADISE CONSTRUCTION JP INC
913 OLDBARN RD
ORLANDO, FL 32825

PLEASE ACCEPT MY CHECK FOR 150 DOLLARS AND REINSTATE MY CORPORATION. I
NEVER RECEIVED THE DEPARTMENT OF STATE FORM THIS YEAR.

JUAN PALACIO