2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V10488

Entity Name: LIGHTING PARADISE CORP.

FILED Jan 24, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5455 SOUTHWEST 8TH STREET 5455 SOUTHWEST 8TH STREET SUITE 135 MIAMI, FL 33134 MIAMI, FL 33134 **New Mailing Address: Current Mailing Address:** PO BOX 44-2700 MIAMI, FL 33144 US FEI Number: 65-0317295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CABO, ANDRES CABO, ANDRES 5455 SOUTHWEST 8TH STREET 5455 SOUTHWEST 8TH STREET SUITE 135 MIAMI, FL 33134 US MIAMI, FL 33134 US 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: 01/24/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CABO, ANDRES Name: Name: PO BOX 44-2700 Address: Address: City-St-Zip: MIAMI, FL 33144 City-St-Zip: VΡ Title: VΡ (X) Change () Addition Title: () Delete Name: DE CABO, DORIS Name: CABO, DORIS PO BOX 44-2700 PO BOX 44-2700 Address: Address: MIAMI, FL 33144 MIAMI, FL 33144 City-St-Zip: City-St-Zip: Title: VPS () Change (X) Addition Title: () Delete LOPEZ, KEVIN Name: Name: PO BOX 44-2700 Address Address: City-St-Zip: City-St-Zip: MIAMI, FL 33144 Title: () Delete Title: () Change (X) Addition CABO, ANDRES Name: Name: Address: Address: PO BOX 44-2700 City-St-Zip: City-St-Zip: MIAMI, FL 33144 Title: Title: () Change (X) Addition () Delete CABO, ANDRES Name: Name: Address: Address: PO BOX 44-2700 City-St-Zip: City-St-Zip: MIAMI, FL 33144 Title: () Delete Title: () Change (X) Addition CABO, ANDRES Name: Name: PO BOX 44-2700 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33144

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: KEVIN LOPEZ MR 01/24/2002