

2001 UNIFORM BUSINESS REPORT (UBR)

102

DOCUMENT # P000000094895
 1. Entity Name
 Paradise Construction Management, Inc.
 CONSULTANT, INC.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 01 DEC 10 PM 3:25

Principal Place of Business Mailing Address
 913 Oldbarn Rd.
 Orlando, FL 32825

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

4. FEI Number 59-3673550 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 Efrain Ospina
 1026 Old Barn Rd
 Orlando, FL 32825

7. Name and Address of New 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 X Juan Palacio, President. 10/01/01
 Signature, typed, printed name of registered agent and title if applicable. (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) FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 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 PD - BD
 NAME Efrain Ospina
 STREET ADDRESS 1026 Old Barn Rd
 CITY-ST-ZIP Orlando, FL 32825
 TITLE Vice-Pd - BD
 NAME Juan Palacio
 STREET ADDRESS 913 Oldbarn Rd
 CITY-ST-ZIP Orlando, FL 32825
 TITLE
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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
 TITLE PD - BD
 NAME Juan Palacio
 STREET ADDRESS 913 Oldbarn Rd
 CITY-ST-ZIP Orlando, FL 32825
 TITLE Vice-President
 NAME Efrain Ospina
 STREET ADDRESS 1026 Old Barn Rd
 CITY-ST-ZIP Orlando, FL 32825
 800004726738-2
 -12/14/01--01047--008
 ****150.00 ****150.00
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an addressee, with all other like empowered.
 SIGNATURE: X Juan Palacio, President 10/01/01
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)

2082

**PARADISE CONSTRUCTION MANAGEMENT
CONSULTANT, INC.**

OCTOBER 01, 2001

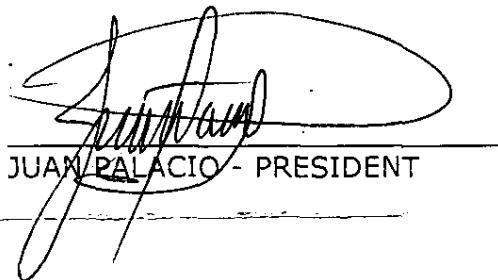
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

PLEASE WAIVE ME THE \$550 PENALTY FOR NOT FILING MY UNIFORM
BUSINESS REPORT IN ON TIME. I HAD NOT PAID BECAUSE I DID NOT
RECEIVED MY REPORT.

MY NEW ADDRESS IS 913 OLDBARN RD
ORLANDO, FL 32825

THANK YOU FOR YOUR ATTENTION,



JUAN PALACIO - PRESIDENT

913 OLDBARN RD - ORLANDO, FL 32812