

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709862

FILED
Feb 17, 2011
Secretary of State

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

Current Principal Place of Business:

450 PARADISE ISLE BOULEVARD
102
HALLANDALE, FL 33009

New Principal Place of Business:

450 PARADISE ISLE BOULEVARD
207
HALLANDALE, FL 33009

Current Mailing Address:

450 PARADISE ISLE BOULEVARD
APT 102
HALLANDALE BEACH, FL 33009

New Mailing Address:

450 PARADISE ISLE BOULEVARD
207
HALLANDALE, FL 33009

FEI Number: 59-1152845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRO, JOAN
450 PARADISE ISLE BOULEVARD
APT 102
HALLANDALE BEACH, FL 33009 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: P
Name: DEMARINIS, JOSEPH
Address: 450 PARADISE ISLE BLVD #206
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VP
Name: CARDILLO, MARCELLA
Address: 450 PARADISE ISLE BLVD #205
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: T
Name: CARRO, JOAN
Address: 450 PARADISE ISLE BLVD #102
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: S
Name: GOLDMAN, BEATRICE
Address: 450 PARADISE ISLE BLVD #207
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D
Name: CARNEY, MAUREEN
Address: 450 PARADISE ISLE BLVD 107
City-St-Zip: HALLANDALE, FL 33009

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: JOAN CARRO

T

02/17/2011

Electronic Signature of Signing Officer or Director

Date