

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709862

**Entity Name:** ISLE OF PARADISE "B", INC.**Current Principal Place of Business:**450 PARADISE ISLE BOULEVARD  
HALLANDALE BEACH, FL 33009**Current Mailing Address:**450 PARADISE ISLE BOULEVARD  
HALLANDALE BEACH, FL 33009 US**FEI Number:** 59-1152845**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIBERIO, TERESA CPA  
12525 SW 34TH PLACE  
DAVIE, FL 33330 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:** TERESA SIBERIO CPA

01/25/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, TREASURER  
Name DEMARINIS, DARIA  
Address 450 PARADISE ISLE BOULEVARD  
UNIT 101  
City-State-Zip: HALLANDALE BEACH FL 33009

Title VP  
Name CARNEY, MAUREEN  
Address 450 PARADISE ISLE BOULEVARD  
UNIT 107  
City-State-Zip: HALLANDALE BEACH FL 33009

Title P  
Name GERBINO, MICHELE  
Address 450 PARADISE ISLE BOULEVARD  
UNITS 307/308  
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR  
Name HEIDBRINK, MICHAEL  
Address 450 PARADISE ISLE BOULEVARD  
UNIT 104  
City-State-Zip: HALLANDALE BEACH 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:** DARIA DEMARINIS

SECRETARY

01/25/2021

Electronic Signature of Signing Officer/Director Detail

Date