

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 474236

1. Corporation Name

PARADISE WORLD CORP.

2. Principal Office Address - No P.O. Box #
2307 DOUGLAS RD.

Suite, Apt. #, etc.

SUITE 302

City & State
MIAMI, FLORIDA

Zip Country
33145 US

3. Mailing Office Address
2307 DOUGLAS RD.

Suite, Apt. #, etc.

SUITE 302

City & State
MIAMI, FLORIDA

Zip Country
33145 US

FILED
09 OCT 20 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
700161949807
10/20/09--01032--006 **300.00
CR2E081 (12/08)
REINSTATEMENT 08-09

4. Date Incorporated or Qualified
To Do Business in Florida **04/17/1975**

5. FEI Number
592326273

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
RAMIREZ, JOSE A

Street Address (P.O. Box Number is Not Acceptable)
2307 DOUGLAS RD.

Suite, Apt. #, Etc.
SUITE 302

City State Zip Code
MIAMI FL 33145

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **10/09/2009**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	RAMIREZ, JOSE A	2307 DOUGLAS RD. SUITE 302	MIAMI, FLORIDA 33145
D	RAMIREZ, MARTHA	2307 DOUGLAS RD. SUITE 302	MIAMI, FLORIDA 33145
D	RAMIREZ, YOLANDA	2307 DOUGLAS RD. SUITE 302	MIAMI, FLORIDA 33145
VS	ROJO, JORGE	2307 DOUGLAS RD. SUITE 302	MIAMI, FLORIDA 33145
D	PALAZUELOS, MARIA LUISA	2307 DOUGLAS RD. SUITE 302	MIAMI, FLORIDA 33145

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

JOSE A RAMIREZ

10/09/09

954-699-0806

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #