2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 634174

FILED Jan 23, 2009 Secretary of State

Entity Name: PARADI	SE EIGHTY, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
136 E COLONIAL DR 200 ORLANDO, FL 32801				
Current Mailing Address:		New Mailing Address:		
P.O. BOX 536401 ORLANDO, FL 32853				
FEI Number: 59-1976289	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
TOWNSEND, FRANK M 520 EMMETT STREET KISSIMMEE, FL 32741	I. US			
The above named entity in the State of Florida.	submits this statement for the p	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electro	nic Signature of Registered Ag	ent	Date	
Election Campaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIREC	CTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS	

8572 LANSMERE LANE

ORLANDO, FL 32835

Address:

City-St-Zip:

Title: PD () Delete Title: (X) Change () Addition NASRINN GHAFFARPOUR, NASRIN GHAFFARPOUR, Name: Name: 5431 VINELAND RD 5367 VINELALND RD Address: Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32811 Title: SD () Delete Title: SD (X) Change () Addition SABETI, PARDIS SABETI, PARDIS Name: Name: Address: Address: 8572 LANSMERE LANE 5431 VINELAND RD ORLANDO, FL 32835 ORLANDO, FL 32811 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition

Name: PARVIZ, SABETI, Name: PARVIZ, SABETI, 5367 VINELANE RD Address: 5431 VINELAND RD Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: ORLANDO, FL 32811

Title: () Delete Title: VΡ (X) Change () Addition PARISA, SABETI, Name:

PARISA, SABETI, Name: 5431 VINELAND RD Address: ORLANDO, FL 32811 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NASRIN GHAFFARPOUR PD 01/23/2009