

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 23 1998 8:00am
Secretary of State

DOCUMENT # **652258**

(5)

1. Corporation Name

PARAMOUNT BUILDERS, INC



Principal Place of Business

**6175 NW 167TH STREET, UNIT G-30
MIAMI FL 33015**

Mailing Address

**11846 SW 93RD TERRACE
MIAMI FL 33186
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1980

4. FEI Number

59-1970040

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**ROBELO, ARNOLDO M
11846 SW 93RD TERRACE
MIAMI FL 33186**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **ROBELO, ARNOLDO M**
STREET ADDRESS **11846 SW 93RD TERRACE**
CITY-ST-ZIP **MIAMI FL**

TITLE **VD** ☒ DELETE

NAME **ROBELO, ARNOLDO R.**
STREET ADDRESS **5831 SW 76TH ST.**
CITY-ST-ZIP **S. MIAMI FL**

TITLE **D** ☒ DELETE

NAME **ROBELO, EDUARDO**
STREET ADDRESS **3633 PALMETTO AVE.**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☒ DELETE

NAME **ROBELO, MICHAEL**
STREET ADDRESS **9971 SW 124TH TERR**
CITY-ST-ZIP **MIAMI FL**

TITLE **T** ☒ DELETE

NAME **ROBELO, IVONNE**
STREET ADDRESS **11846 SW 93RD TERRACE**
CITY-ST-ZIP **MIAMI FL**

TITLE **S** ☐ DELETE

NAME **ROBELO, AGNES**
STREET ADDRESS **11846 SW 93RD TERRACE**
CITY-ST-ZIP **MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

MIAMI, FL. 33186

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

S/T

MIAMI, FL. 33186

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

ARNOLDO M. ROBELO President 7/16/98 (305) 828-4760

CR2E034 (5/98)