## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 826058**

FILED Jan 11, 2006 Secretary of State

Entity Name: THE PARADIES SHOPS INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6000 CH	RIDA REGINA AMBERLAIN F S, FL 33913	L AIRPORT PKWY, SUITE #8673 US			
Current Mailing Address:			New Mailing Address:		
.O.BOX 4		RIAL BLVD. SW			
El Number	: 58-0839094	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	ATION SERVI S STREET SSEE, FL 323	801 US			
ALLAHA: ne above the State	S STREET SSEE, FL 323 named entity e of Florida.		e purpose of changing its registere	ed office or registered agent, or both,	
ALLAHA: he above the State	S STREET SSEE, FL 323 named entity of Florida.  RE:			ed office or registered agent, or both,  Date	
ALLAHA: he above the State	S STREET SSEE, FL 323 named entity of Florida.  RE: Electro	submits this statement for th			
ALLAHA: he above the State GNATUI	S STREET SSEE, FL 323 named entity of Florida.  RE: Electro	submits this statement for the nic Signature of Registered /	Agent		
ALLAHA: he above the State IGNATUI	S STREET SSEE, FL 323 e named entity e of Florida.  RE: Electro mpaign Financir S AND DIREC	submits this statement for the nic Signature of Registered A grant Fund Contribution ( ).  CTORS:  ) Delete CHARD IND BLVD	Agent	- Date	
ALLAHA: ne above the State GNATUI ection Car FFICER: le: ame: ldress:	S STREET SSEE, FL 323 e named entity e of Florida.  RE: Electro mpaign Financir S AND DIREC PD ( DICKSON, RIC 5950 FULTON ATLANTA, GA  VS ( PARADIES, JA	submits this statement for the nic Signature of Registered // ing Trust Fund Contribution ( ).  CTORS:  ) Delete CHARD IND BLVD 30336  ) Delete MES IND BLVD SW	Agent  ADDITIONS/CHANG  Title: Name: Address:	Date  BES TO OFFICERS AND DIRECTORS	

I hereby certify that the information supplied with this filing does not qualify for the 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: DON MAREK VF 01/11/2009	3
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