

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G53983 (4)

1. Corporation Name
FIRST PARAGON, INC.



Principal Place of Business 3405-B NW 72ND AVE MIAMI FL 33122	Mailing Address P. O. BOX 528042 MIAMI FL 33152
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1351 NW 78th Ave	26 1351 NW 78th Ave			08/12/1983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				59-2435087	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Miami, FL		Miami, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip	25 Country	29 Zip	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
33124		33124			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MILMAN, RALPH 7732 CAMINO REAL, F-403 MIAMI FL 33143				81 Name	Wesley J. Allen		
				82 Street Address (P.O. Box Number is Not Acceptable)	1351 NW 78th Ave		
				83			
				84 City	Miami	85 Zip Code	FL 33124

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]* **JICE PRESIDENT** DATE: **4/28/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
<input type="checkbox"/> DELETE	P MILMAN, RALPH	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
	7732 CAMINO REAL F-403	13 STREET ADDRESS	1351 NW 78th Ave
	MIAMI FL 33143	14 CITY-ST-ZIP	MIAMI, FL 33124
<input type="checkbox"/> DELETE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		22 NAME	
<input type="checkbox"/> DELETE		23 STREET ADDRESS	
<input type="checkbox"/> DELETE		24 CITY-ST-ZIP	
<input type="checkbox"/> DELETE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		32 NAME	
<input type="checkbox"/> DELETE		33 STREET ADDRESS	
<input type="checkbox"/> DELETE		34 CITY-ST-ZIP	
<input type="checkbox"/> DELETE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		42 NAME	
<input type="checkbox"/> DELETE		43 STREET ADDRESS	
<input type="checkbox"/> DELETE		44 CITY-ST-ZIP	
<input type="checkbox"/> DELETE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		52 NAME	
<input type="checkbox"/> DELETE		53 STREET ADDRESS	
<input type="checkbox"/> DELETE		54 CITY-ST-ZIP	
<input type="checkbox"/> DELETE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		62 NAME	
<input type="checkbox"/> DELETE		63 STREET ADDRESS	
<input type="checkbox"/> DELETE		64 CITY-ST-ZIP	

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 as an attachment with an address.

SIGNATURE: *[Signature]* DATE: **4/28/98**

CR2E034 (10/97)