

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT
AMENDED 1995



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

DOCUMENT # J91163
 1. Corporation Name
PARAGON SERVICES, INC.

APPROVED AND FILED
 95 JUN 19 PM 2:03
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
 P.O. Box 1907 Hobe Sound, Fl. 33475-1907
 US US

2. Principal Place of Business 2a. Mailing Address
 21 Suits, Apt #, etc 26 Suits, Apt #, etc
 22 City & State 27 City & State
 23 Zip 24 Country 25 28 Zip 29 Country 30

DO NOT WRITE IN THIS SPACE.
 3. Date Incorporated or Qualified 09/02/87
 3a. Date of Last Report 4/18/95
 4. FEI Number 65-0013134 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 has liability for intangible tax under S. 199.017 Florida Statutes Yes No

9. Name and Address of Current Registered Agent
 MCSTRAVICK, JAMES P
 2234 ARTHUR ST.
 HOLLYWOOD, FL. 33020

10. Name and Address of New Registered Agent
 B1 Name
 B2 Street Address (P.O. Box Number is Not Acceptable)
 B3
 B4 City FL B5 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 fee if applicable) (NOT Required) Agent signature required when re-registering. DATE _____

12. OFFICERS AND DIRECTORS
 TITLE NAME STREET ADDRESS CITY ST ZIP
 P/V/S/T KLEIN, JAMES C. 8891 SE EAGLE AVENUE HOBE SOUND, FL.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 11 TITLE P/V/S/T Change Addition
 12 NAME KLEIN, JAMES C.
 13 STREET ADDRESS 8891 SE EAGLE AVENUE
 14 CITY ST ZIP HOBE SOUND, FL. 33455
 21 TITLE Change Addition
 22 NAME 200001518042
 23 STREET ADDRESS -06/20/95--01103--024
 24 CITY ST ZIP *****61.25 *****61.25
 31 TITLE Change Addition
 32 NAME
 33 STREET ADDRESS
 34 CITY ST ZIP
 41 TITLE Change Addition
 42 NAME
 43 STREET ADDRESS
 44 CITY ST ZIP
 51 TITLE Change Addition
 52 NAME
 53 STREET ADDRESS
 54 CITY ST ZIP
 61 TITLE Change Addition
 62 NAME
 63 STREET ADDRESS T.S. 6/19/95
 64 CITY ST ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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: *James C. Klein* 5/24/95 (407) 546-3789

 SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR (Date) (Signature Here)

JAMES C. KLEIN, PRESIDENT