2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000028037

1. Entity Name

PARADISE CONSULTING & INVESTMENTS, LLC

FILED Jan 16, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

9162 HOLLOW PINE DRIVE **BONITA SPRINGS, FL 34135** 9162 HOLLOW PINE DRIVE **BONITA SPRINGS, FL 34135**



DO NOT WRITE IN THIS SPACE

01112008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-4523650

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FINERTY, PATRICK J 9162 HOLLOW PINE DRIVE **BONITA SPRINGS, FL 34135**

SIGNATURE: 4

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FINERTY, PATRICK J 9162 HOLLOW PINE DRIVE BONITA SPRINGS, FL 34135	
TITLE NAME STREET ADDRESS City-St-zip		U00000786430 01/17/08-80039-018 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· -	DO NOT WRITE
NAME . STREET ADDRESS CITY-SI-ZIP		IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP	Andrews (1985) Andrew	
TITLE NAME STREET ADDRESS CITY4ST-ZIP4V	HOLE TO BE THE FEB THE STATE OF THE STATE	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		

IGNING MANAGING MEMBER, OF AUTHORIZED REPRESENTATIVE