


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # L40601 1. Entity Name PARADISE HOLDINGS, INC.	
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Principal Place of Business 1900 TYTUS AVENUE MIDDLETOWN, OH 45042 US	Mailing Address 1900 TYTUS AVENUE MIDDLETOWN, OH 45042 US
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DO NOT WRITE IN THIS SPACE



02042007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0168672	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROLAND, DOUGLAS C ESQ.
500 E. KENNEDY BLVD., STE. 200
TAMPA, FL 33602

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000633739 02/21/07-80074-003 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT SORRELL, R. MICHAEL 1900 TYTUS AVE MIDDLETOWN, OH 45042
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SORRELL, WENDY A 3604 SHERMAN AVE. MIDDLETOWN, OH 45044
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IN THIS SPACE**

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE R. Michael Sorrell 2/6/07 513-424-6484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #