2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 13, 2002 8:00 am
Secretary of State
06-13-2002 90388 006 ****50.00

DOCUMENT # M00000002527

1. Entity Name
PARADIGM INDUSTRIES, L.L.C.

Principal Place of Business	Mailing Address
9822 EMERALD LINKS TAMPA FL 33626	9822 EMERALD LINKS TAMPA FL 33626

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 13-4142335 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LIGHTMAN, ELLIOTT
9822 EMERALD LINKS
TAMPA FL 33626

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number Is Not Acceptable)
City FL Zip Code

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.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GIARRATANA, EUGENE R 40 CEDAR STREET DOBBS FERRY NY 10522	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LIGHTMAN, ELLIOTT D 9822 EMERALD LINKS TAMPA FL 33626	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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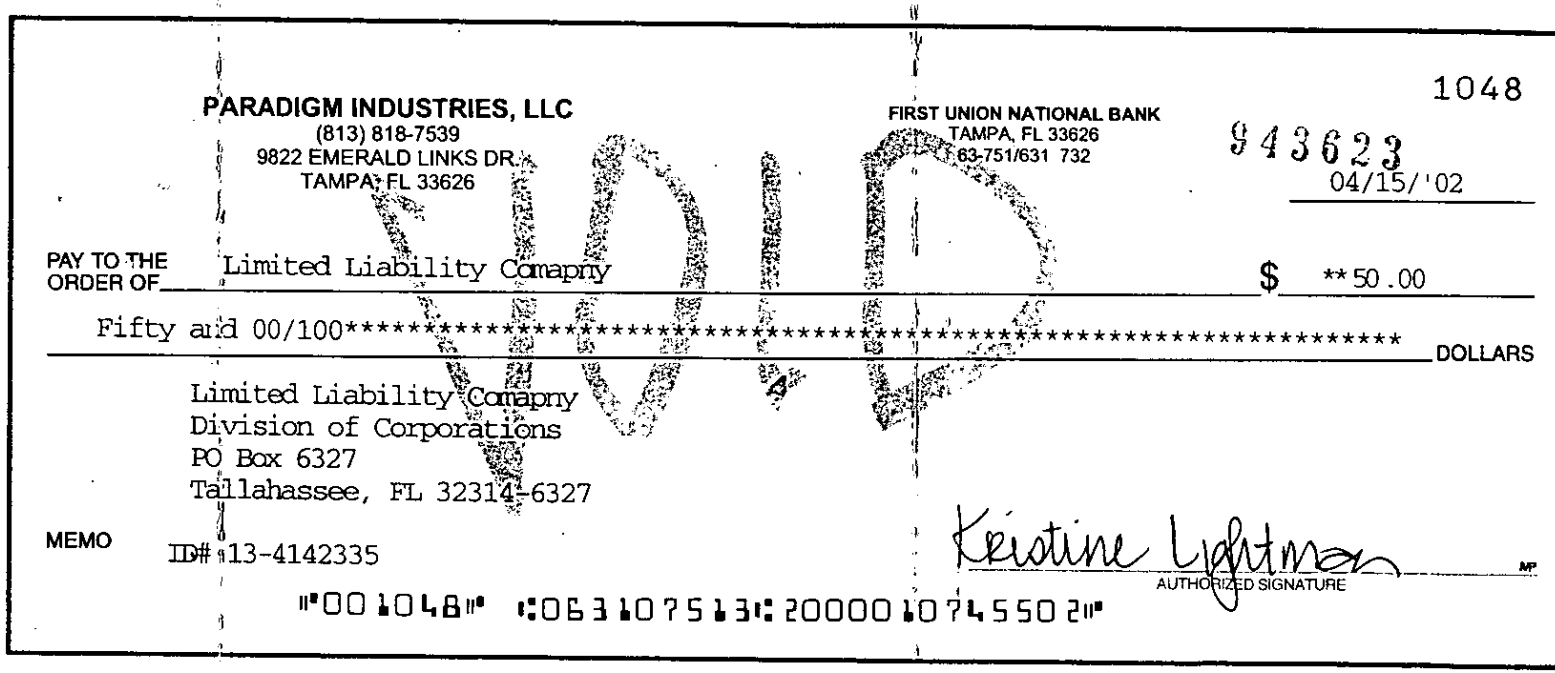
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E083 (9/01)

11. 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 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.

SIGNATURE: Elliott D. Lightman MGRM 4-06-02 813-818-7539
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Attachment #1690577



PARADIGM INDUSTRIES, LLC
(813) 818-7539
9822 EMERALD LINKS DR.
TAMPA, FL 33626

FIRST UNION NATIONAL BANK
TAMPA, FL 33626
63-751/631 732

1048

943623

04/15/'02

PAY TO THE ORDER OF Limited Liability Comapny $ **50.00

Fifty and 00/100********** DOLLARS

Limited Liability Comapny
Division of Corporations
PO Box 6327
Tallahassee, FL 32314-6327

MEMO ID# 13-4142335

Kristine Lightman MP
AUTHORIZED SIGNATURE

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