2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 30, 2004 8:00 am Secretary of State DOCUMENT # P0000006010 04-30-2004 90270 001 ***150.00 PARADIGM PUBLISHING, INC. Principal Place of Business Mailing Address J4UI DJJU 3145 HERDON LAKE DRIVE 3145 HERDON LAKE DRIVE STE D STE D KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 3. Mailing Address 3/Y5 HERON 2. Principal Place of Business 3145 HERON Suite, Apt. #, etc. Suite, Apt. #, etc 04202004 CR2E034 (10/03) Chg-P STE D STE 4. FEI Number Applied For City & State 59-3616880 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ENRY BAUMRUK, ANDREW J Box Number is Not Acceptable) ERDN LAKE DRIVE 717 EAST OAK ST. KISSIMMEE, FL 34744 8. The above named entity submits this statement for the purpose of changing its registered office of egistered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SAMES NELSON HENRY SIGNATURE. printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. VS TITLE ☐ Change Addition TITLE ☐ Delete HENRY, BRANDI NAME NAME 3145-D HERON LAKE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KISSIMMEE, FL 34741 CITY-ST-ZIP PTD TITLE ☐ Delete ☐ Change ☐ Addition NAME HENRY, NICK NAME 3145-D HERON LAKE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KISSIMMEE, FL 34741 CITY - ST - 7/P TITLE ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 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 all other like empowered. NELSON HENRY SIGNATURE:

FILED