

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000008047

1. Entity Name
PARADISE WEBS, INC.

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 91352 020 ***150.00

Principal Place of Business
**9300 REGENCY PARK BLVD.
PORT RICHEY FL 34668**

Mailing Address
**9300 REGENCY PARK BLVD.
PORT RICHEY FL 34668**

2. Principal Place of Business
5514 CARBINE COURT
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
NEW PORT RICHEY, FL
Zip
34655
Country
PASCO

City & State
Zip
Country

4. FEI Number
59-3621020
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

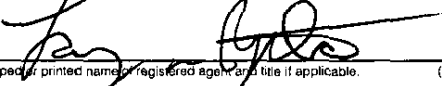
6. Name and Address of Current Registered Agent

**PYTLAK, LARRY
8740 BASS LAKE DR.
NEW PORT RICHEY FL 34654**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
5514 CARBINE COURT
City
NEW PORT RICHEY **FL** Zip Code
34655

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  **2-24-01**
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **LARRY M. PYTLAK** **2-24-01** **(727) 376-4900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)