2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

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FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P0000090396 PARADISE HOME INVESTMENTS, INC. 04-26-2001 90025 004 ***150.00 Principal Place of Business Mailing Address 1402 SW 13TH TERRACE 1402 SW 13TH TERRACE CAPE CORAL FL 33991 CAPE CORAL FL 33991 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MEYERS, JOHN W Street Address (P.O. Box Number is Not Acceptable) 1402 SW 13TH TERRACE CAPE CORAL FL 33991 Zip Code se of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity subm s statement lo Signature, typed or printe / F**I**LE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and lects to do After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Γ Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (10/00) TRESIDENT ☐ Addition ☐ Delete TITLE Change TITLE JOHN MEYERS 1402 S.W 13th TERR NAME NAME STREET ADDRESS STREET ADDRESS CAPE CERAL, FL. 33991 CITY-ST-ZIP CITY-ST-7iP Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STHEET ADDRESS STREET ADDRESS C!1Y - ST - ZIP CITY-ST-ZIP FASURER ☐ Delete TITLE Change □ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Change ☐ Addition Delete TITLE TITLE NAMS NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Channe ☐ Addition Deiete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE THILE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY - ST - 7IP 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 e and that my signature shall have the same legal effect as if made under oath; that I am an officer or director this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or the changed, or on an attachment with a