


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 05, 2005 8:00 am
Secretary of State

07-05-2005 90220 014 ***150.00

DOCUMENT # P02000058621 1. Entity Name PARADISE SAFETY ONE, INC.	
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Principal Place of Business 923 E STATE RD 434 LONGWOOD, FL 32750	Mailing Address 923 E STATE RD 434 LONGWOOD, FL 32750
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DO NOT WRITE IN THIS SPACE



50054887

06292005 No Chg-P CR2E034 (10/03)

4. FEI Number 01-0709942	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GLAVIN, GRACE A ESQUIRE 1340 TUSKAWILLA RD, STE 106 WINTER SPRINGS, FL 32708
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**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 _____ <small>Signature of principal, partner, officer, director, or registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEATHERMAN, JOE R 923 STATE RD 434 LONGWOOD, FL 32750
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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	06-29-05 <small>Date</small>	4073398040 <small>Daytime Phone #</small>
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ATTACHMENT
50054887

June 29, 2005

To: Florida Division of Corporations
P.O.Box 1500
Tallahassee, FL, 32302-1500

RE: For Profit Corporations Annual Report
Paradise Safety One, Inc. Document P02000058621.

To Whom It May Concern:

This letter is to inform you of the material fact that prior to June 28, 2005, I had not received prior notification of the requirement or deadline for filing a 2005 For Profit Corporation Annual Report. Yesterday, I received a notification of Notice of Intent to Dissolve if the report and the fee was not paid.

With this letter, I have enclosed the filing fee of \$150.00 and ask to be relieved of the late filing fee under the Florida statue that allows exemption of the late fee due to no receipt of prior notice before May 1, 2005.

The address is correct on the Annual Report form, so next year, I should receive proper notification timely to avoid filing the report late in 2006.

Thank you for your understanding in this matter.

Sincerely,



Joe R. Leatherman
President,
Paradise Safety One, Inc.
923 E State Road 434
Longwood, FL 32750