

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

8/5/2003-90115-002-\$8.75-\$8.75 *
8/5/2003-90115-001-\$150.00-\$150.00

FILED
03 OCT 14 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000077659

1. Entity Name
PARADOX RECORDS, INC.

Principal Place of Business
4332 SW 78 DR
DAVIE FL 33328

Mailing Address
4332 SW 78 DR
DAVIE FL 33328

2. Principal Place of Business
5925 SW 44TH ST
Suite, Apt. #, etc.

3. Mailing Address
5925 SW 44TH ST
Suite, Apt. #, etc.

City & State
DAVIE FL

City & State
DAVIE FL

Zip
33314

Country
BROWARD

4. FSL Number
87-0695840

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
ARISTIZABAL FELIPE
4332 SW 78 DR
DAVIE FL 33328

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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

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: 3/28/2003 REQUIRED 07/28/03 (954) 249-8553
Signature and typed or printed name of signing officer or director Date Daytime Phone

CP20034 (4/03)

VICE - PRESIDENT

NAPHTALI PATTERSON

4311 S.W. 160th AVE. BLD. 3 UNIT 200

MIRAMAR, FL, 33027

BUSINESS MANAGER

JUAN MARQUEZ JARAMILLO

1408 BR. KELL BAY DR. APT 105

MIAMI, FL, 33131

Attachment

PARADOX RECORDS, INC.

DOCUMENT # P02000077659

55055691

DIRECTOR OF PROMOTIONS

CHRIS LOPEZ

4311 SW 160th AVE BLD 3
UNIT 200 MIRAMAR FL
33027

Attachment

55055691

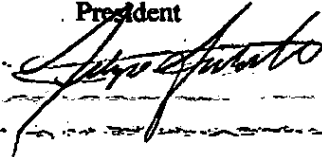
#P02000077659

To whom it may concern,

The corporation did not receive the prior notice. I did change location, but I did not even received it at the old location. I have enclosed my new mailing address. I am also sending you the \$150.00 you asked for.

Thank You!

Felipe Aristizabal, AKA Dox
President



attachment

55055691

[REDACTED]

#P03000077659

To whom it may concern,

I would like to receive the statues, shares, or seal. I have enclosed \$8.50 with this letter. Any information that I would need to help me start my small business, please inform me off, either if there is a cost or free.

Thank You!

Felipe Aristizabal, AKA Dox
President of Paradox Records, Inc.