

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 28, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P02000079528**

1. Entity Name  
**PARADISE PRESS & ASSOCIATES, INC.**



Principal Place of Business  
**16950 APOPKA SPRINGS BLVD  
MONTEVERDE, FL 34756**

Mailing Address  
**16950 APOPKA SPRINGS BLVD  
MONTEVERDE, FL 34756**

**DO NOT WRITE IN THIS SPACE**



02252004 No Chg-P CR2E034 (10/03)

4. FEI Number  
**81-0562815**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**YOUMAN, HARRIET F  
16950 APOPKA SPRINGS BLVD  
MONTEVERDE, FL 34756**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

000000071356  
03/01/04-80066-024 158.75

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PCEO  
YOUMAN, HARRIET F  
16950 APOPKA SPRINGS BLVD  
MONTEVERDE, FL 34756**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(c), 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:

*Harriet F. Youman* **Harriet F. Youman PCEO** **2/26/04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #