

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

Page 1 of 2

mailed
8/2/04

DOCUMENT # P03000047813		1. Entity Name PARADISE DREAM INVESTMENT CLUB INC.		208-0000351 PM 12:38 FILED 04 AUG 2004 TALLAHASSEE, FLORIDA CR20040104	
08-06-04 90001045		Principal Place of Business 10555 SHAMROCK ROAD JACKSONVILLE, FL 32256		Mailing Address 10555 SHAMROCK ROAD JACKSONVILLE, FL 32256	
2. Principal Place of Business		3. Mailing Address		4. FEE Number 20-30006807	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent JACKSON, JEREMIAH 10555 SHAMROCK ROAD JACKSONVILLE, FL 32256			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JACKSON, JEREMIAH		NAME		
STREET ADDRESS	10555 SHAMROCK ROAD		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32256		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOLMES, BRYAN		NAME		
STREET ADDRESS	1179 PANGOLA DRIVE		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32208		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Jeremiah Jackson			8/2/04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Page 2 of 2

Simon, Simon, Ratnecht & Associates, Inc.

Certified Public Accountants

8750 Perimeter Park Boulevard Jacksonville, FL 32216-6347

Phone: 904-928-1040 Fax: 904-928-0909

www.simonc.net

October 20, 2004

Florida Department of State
Division of Corporations
Attn: Jeraline Saulsberry
P.O. Box 6327
Tallahassee, FL 32314

Re: Paradise Dream Investment Club, Inc.

EIN# 20-0006807/ Document # P03000047813

As discussed, please find the enclosed copies of the Uniformed Business Report and the proof of payment that was mailed in a timely manner on August 2, 2004.

Per our conversation, please abate the Notice of Dissolution and correct your records accordingly.

Thank you for your expedient service in regards to this matter.

Very truly yours,

A handwritten signature in cursive script that reads "Deborah Alexa".

Deborah Alexa
Office Manager