

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032191

Entity Name: PARAMOUNT SUPPLY INC.

FILED  
May 05, 2005  
Secretary of State

## Current Principal Place of Business:

614 SE 24 STREET  
OCALA, FL 34471

## New Principal Place of Business:

615 SE 24 STREET  
OCALA, FL 34471

## Current Mailing Address:

614 SE 24 STREET  
OCALA, FL 34471

## New Mailing Address:

P.O. BOX 831882  
OCALA, FL 34483

FEI Number: 20-0683397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STRADE, DEBRA  
127 REDWOOD TRACK COURSE  
OCALA, FL 34472 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: STRADE, DEBRA  
Address: 614 SE 24 STREET  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STRADE, DEBRA  
Address: 614 SE 24 STREET  
City-St-Zip: OCALA, FL 34471

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA A STRADE

P

05/05/2005

Electronic Signature of Signing Officer or Director

Date