

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000011036

**FILED**  
**Jun 15, 2006**  
**Secretary of State**

**Entity Name:** PARADISE KITCHENS, INC. OF S.W. FLA.

**Current Principal Place of Business:**

15248 US 41 SUITE 200  
FT MYERS, FL 33908

**New Principal Place of Business:**

15248 US 41 SUITE 200  
SUITE 200  
FT MYERS, FL 33908

**Current Mailing Address:**

PO DRAWER 60205  
FT MYERS, FL 33906

**New Mailing Address:**

**FEI Number:** 36-4568399

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROYSTON, ROBERT D JR  
12670 NEW BRITTANY BLVD SUITE 101  
FT MYERS, FL 33907 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: MAZZA, GEORGE  
Address: 260 VIRGINIA AVE  
City-St-Zip: FT MYERS BEACH, FL 33931

Title: D ( ) Delete  
Name: DEGIORGIO, SEBASTIAN  
Address: PO BOX 61983  
City-St-Zip: FT MYERS, FL 33906

Title: D (X) Delete  
Name: STEHLE, NANCY J  
Address: 8388 SOUTHWIND BAY CIRCLE  
City-St-Zip: FT MYERS, FL 33908

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MAZZA, GEORGE  
Address: 5485 AVENIDA PESCADORA  
City-St-Zip: FT MYERS BEACH, FL 33931

Title: D (X) Change ( ) Addition  
Name: MAZZA, JOANNE J  
Address: 5485 AVENIDA PESCADORA  
City-St-Zip: FT MYERS BEACH, FL 33931

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GEORGE MAZZA

PRES

06/15/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date