2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138542

City-St-Zip:

MIAMI, FL 33139

FILED Sep 01, 2006 Secretary of State

Entity Nar	me: PARADISO 978, INC.			
Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
1111 LINCOLN ROAD SUITE 400 MIAMI, FL 33139		1111 LINCOLN ROAD SUITE 400 MIAMI BEACH, FL 33139		
Current M	lailing Address:	New Mailing Address:		
1111 LINCOLN ROAD SUITE 400 MIAMI, FL 33139		1111 LINCOLN ROAD SUITE 400 MIAMI BEACH, FL 33139		
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable () Certificate of Status Des	ired()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent	Name and Address of New Registered Agent:	
1201 HAYS	ATION SERVICE COMPANY S STREET SSEE, FL 32301 US	O'REGAN, SHAWN M D 1111 LINCOLN ROAD SUITE 400 MIAMI BEACH, FL 33139 US	1111 LINCOLN ROAD SUITE 400	
	named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered ager	ıt, or both,	
SIGNATUR	RE: SHAWN M. O'REGAN	09/01/2006	09/01/2006	
	Electronic Signature of Registered A	Agent Date		
	ce with s. 607.193(2)(b), F.S., the corporation did npaign Financing Trust Fund Contribution ().	not receive the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND D	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete O'REGAN, SHAWN M 1111 LINCOLN ROAD, SUITE 400 MIAMI, FL 33139	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete O'REGAN, ROBERT H 1111 LINCOLN ROAD, SUITE 400 MIAMI, FL 33139	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address:	D () Delete O'REGAN, FLORENCE 1111 LINCOLN ROAD, SUITE 400	Title: () Change () Addition Name: Address:		

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.

City-St-Zip:

SIGNATURE: SHAWN M. O'REGAN 09/01/2006 D