

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000017106

Entity Name: PARADOX MASONRY CORP.

FILED  
Jan 12, 2007  
Secretary of State

## Current Principal Place of Business:

241 NE 44TH STREET  
OAKLAND PARK, FL 33334 US

## Current Mailing Address:

241 NE 44TH STREET  
OAKLAND PARK, FL 33334 US

## New Principal Place of Business:

1701 W HILLSBORO BLVD  
STE 305  
DEERFIELD BEACH, FL 33442 US

## New Mailing Address:

1701 W HILLSBORO BLVD  
STE 305  
DEERFIELD BEACH, FL 33442 US

FEI Number: 20-4233895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OGREN, NATHAN  
241 NE 44TH STREET  
OAKLAND PARK, FL 33322 US

## Name and Address of New Registered Agent:

OGREN, NATHAN  
1701 W HILLSBORO BLVD  
STE 305  
DEERFIELD BEACH, FL 33442 US

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: NATHAN OGREN

01/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OGREN, NATHAN  
Address: 241 NE 44TH STREET  
City-St-Zip: OAKLAND PARK, FL 33334 US

Title: S ( ) Delete  
Name: BARGAS, DAVID M  
Address: 2425 SW 40TH CIRCLE  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OGREN, NATHAN  
Address: 1701 W HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33442 US

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: NATHAN OGREN

P

01/12/2007

Electronic Signature of Signing Officer or Director

Date