2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000099479

Entity Name: FLORIDA PARADISE CONSTRUCTION CORP

FILED Jul 09, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

4080 33RD AVE. NE 15324 SW 53RD ST NAPLES, FL 34120 US MIAMI, FL 33185 US

Current Mailing Address: New Mailing Address:

4080 33RD AVE. NE 15324 SW 53RD ST NAPLES, FL 34120 US MIAMI, FL 33185 US

FEI Number: 20-5523039 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PUENTES, ILEANA B PUENTES, ILEANA B 15324 SW 53RD ST 3631 14TH AVE NE NAPLES, FL 34120 US MIAMI, FL 33185

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: ILEANA B PUENTES 07/09/2009

> 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:

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: () Delete Title: (X) Change () Addition PUENTES, ILEANA B PUENTES, ILEANA B Name: Name: 4080 33RD AVE NE 1361 GOLDEN GATE BLVD W Address: Address: NAPLES, FL 34120 US City-St-Zip: NAPLES, FL 34120 US City-St-Zip:

Title: VΡ Title: VΡ

PUENTES, ULISES Name: PUENTES, ULISSES Name: 4080 33RD AVE. NE 3231 18 AVE NE Address: Address: NAPLES, FL 34120 US NAPLES, FL 34120 US City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete CGM

Name: AVILES, RENE A Name: 328 NE 17 AVE Address: Address:

City-St-Zip: City-St-Zip: CAPE CORAL, FL 33909 US

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: ILEANA B PUENTES 07/09/2009