

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121487

FILED  
May 24, 2007  
Secretary of State

Entity Name: PARADISE DESIGNS OF CENTRAL FLORIDA INC.

**Current Principal Place of Business:**

5449 SE 32ND PLACE  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

5449 SE 32ND PLACE  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 20-5701908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MONTANEZ, VICTOR  
5449 SE 32ND PLACE  
OCALA, FL 34471 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: MONTANEZ, VICTOR  
Address: 5449 SE 32ND PLACE  
City-St-Zip: OCALA, FL 34471

Title: PVST ( ) Delete  
Name: MONTANEZ, VICTOR  
Address: 5449 SE 32ND PLACE  
City-St-Zip: OCALA, FL 34471

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

Title: VP (X) Change ( ) Addition  
Name: MONTANEZ, VICTOR  
Address: 5449 SE 32ND PLACE  
City-St-Zip: OCALA, FL 34471 US

Title: PST (X) Change ( ) Addition  
Name: MONTANEZ, TRICIA L  
Address: 5449 SE 32ND PLACE  
City-St-Zip: OCALA, FL 34471 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.

SIGNATURE: VICTOR MONTANEZ

VP

05/24/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date