

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149746

Entity Name: VISUAL PARADISE, INC.

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

1113 TUPELO WAY
WESTON, FL 33327

New Principal Place of Business:

6734 SALTAIRE TER
MARGATE, FL 33063

Current Mailing Address:

1113 TUPELO WAY
WESTON, FL 33327

New Mailing Address:

6734 SALTAIRE TER
MARGATE, FL 33063

FEI Number: 51-0580950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICCA WATLER, NICOLE A
1113 TUPELO WAY
WESTON, FL 33327 US

Name and Address of New Registered Agent:

RICCA, NICOLE A
6734 SALTAIRE TER
MARGATE, FL 33063 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: NICOLE RICCA

05/08/2009

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:

Title: PD () Delete
Name: RICCA WATLER, NICOLE A
Address: PO BOX 266281
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RICCA, NICOLE A
Address: 6734 SALTAIRE TER
City-St-Zip: MARGATE, FL 33063

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: NICOLE RICCA

PD

05/08/2009

Electronic Signature of Signing Officer or Director

Date