

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000107088

FILED
Jan 08, 2010
Secretary of State

Entity Name: PARAMUS INC

Current Principal Place of Business:

940 S. MILITARY TRAIL
UNIT # 11
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

Current Mailing Address:

130 SOUTH SEQUOIA DRIVE
WEST PALM BEACH, FL 33409 US

New Mailing Address:

940 S. MILITARY TRAIL
UNIT # 11
WEST PALM BEACH, FL 33415 US

FEI Number: 26-3868091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBERS, KEITH
130 SOUTH SEQUOIA DRIVE
WEST PALM BEACH, FL 33409 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: CHAMBERS, KEITH
Address: 130 SOUTH SEQUOIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: D
Name: CHAMBERS, CHERISE A
Address: 130 SOUTH SEQUOIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: P
Name: CHAMBERS, KEITH
Address: 130 SOUTH SEQUOIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: S
Name: CHAMBERS, CHERISE A
Address: 130 SOUTH SEQUOIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: T
Name: CHAMBERS, KEITH
Address: 130 SOUTH SEQUOIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409 US

I hereby 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 all other like empowered.

SIGNATURE: KEITH CHAMBERS

P

01/08/2010

Electronic Signature of Signing Officer or Director

_____ Date