Ilorida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

DISSOLUTION OR WITHDRAWAL BULLZ PARADISE INC.

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ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	BULLE PARADISE INC.		
SECOND:	The document number of the corporation (i.e., 1)	690	
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file d	stc)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes east for a was sufficient for approval.	lissolütion	
	Dissolution was approved by the shareholders through voting groups.		
•	The following statement must be separately provided for each voting group entite to vote separately on the plan to dissolve:	2004 OCT 25	
:	The number of votes cast for dissolution was sufficient for approval by	25	
;		AH .	
	(voting group)	9 9	
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fid sciary, by	Î	
•	that fiduciary) AFAEL CABA! (ERO		
•	(Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35