2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2009
Secretary of State

DOCUMENT# P92000012071

Entity Name: PARAMUS ASSOCIATES, INC.

Current Principal Place of Business:

6550 NORTH FEDERAL HIGHWAY
STE 210
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

6550 NORTH FEDERAL HIGHWAY
STE 522
FORT LAUDERDALE, FL 33308 US

Current Mailing Address:

6550 NORTH FEDERAL HIGHWAY
STE 210
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

6550 NORTH FEDERAL HIGHWAY
STE 522
FORT LAUDERDALE, FL 33308 US

FEI Number: 65-0378379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANTOR, SAMUEL J
2499 GLADES ROAD
STE 210
BOCA RATON, FL 33431 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 ( ) Delete
Name: BISTRICER, HERMAN
Address: 6550 NORTH FEDERAL HWY, STE 240
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: PS ( ) Delete
Name: BLATT, ROBERT
Address: 6550 NORTH FEDERAL HWY, STE 240
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BISTRICER, SIMONE
Address: 6550 NORTH FEDERAL HWY, STE 522
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D (X) Change ( ) Addition
Name: BISTRICER, SUZANNE
Address: 6550 NORTH FEDERAL HWY, STE 522
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: P ( ) Change (X) Addition
Name: BLATT, ROBERT
Address: 6550 NORTH FEDERAL HWY, STE 522
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S ( ) Change (X) Addition
Name: GANS, MARK
Address: 6550 NORTH FEDERAL HWY, STE 522
City-St-Zip: FORT LAUDERDALE, FL 33308

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: ROBERT BLATT P 02/13/2009

Electronic Signature of Signing Officer or Director Date