FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

[illegible] DEPARTMENT OF STATE

AP[illegible]ED

DOCUMENT # **P93000035892 (7)**

1 [illegible]

RAS ENTERPRISES, INC.

[illegible]

999 PONCE DE LEON BLVD.
SUITE 705
CORAL GABLES FL 33134

Mailing Address

999 PONCE DE LEON BLVD.
SUITE 705
CORAL GABLES FL 33134

3. Date Incorporated or Qualified
05/18/1993

3a. Date of Last Report
04/28/1994

4. FEI Number
65-0417562
☐ Applied For
☐ Not Applicable

2 [illegible]
21
2a Mailing Address
26
22
27
23
28
24
25
29
30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. [illegible] Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ARANGO, ALVARO
999 PONCE DE LEON BLVD.
SUITE 705
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL
85 Zip Code

11. [illegible]

SIGNATURE

12. OFFICERS AND DIRECTORS

PD
ARANGO, ALVARO
12251 S.W. 96TH ST.
MIAMI FL 33186

PD
ARANGO, ANA
12251 S.W. 96TH ST.
MIAMI FL 33186

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

14. [illegible]

(505)

SIGNATURE: ✓ Ana E. Arango

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ 5-1-95 ✓ 27 8556

5% 4347

0137012 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

... 9:37

DOCUMENT # P93000036363 (8)

1. Corporate Name

PARAMOUNT POWER, INC.

Principal Place of Business
7855 126TH AVE N
LARGO FL 34643

Mailing Address
7855 126TH AVE N
SUITE H
LARGO FL 34643
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/20/1993
3a. Date of Last Report: 06/20/1994

2. Principal Place of Business
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation is eligible for exemption under s. 607.... Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

JONES, BRADLEY C
7855 126TH AVE N
LARGO FL 34643

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS INFO.
TITLE	D	1) TITLE	☐ Change ☐ Addition
NAME	JONES, BRADLEY C	1) NAME	
STREET ADDRESS	7855 126TH AVE N	1) STREET ADDRESS	
CITY-ST-ZIP	LARGO FL 34643	1) CITY-ST-ZIP	
TITLE	S/T	2) TITLE	☐ Change ☐ Addition
NAME	Jones, Karen R.	2) NAME	
STREET ADDRESS	6320 Elmhurst Dr.	2) STREET ADDRESS	
CITY-ST-ZIP	Pinellas Park, FL 34666	2) CITY-ST-ZIP	
TITLE		3) TITLE	☐ Change ☐ Addition
NAME		3) NAME	
STREET ADDRESS		3) STREET ADDRESS	
CITY-ST-ZIP		3) CITY-ST-ZIP	
TITLE		4) TITLE	☐ Change ☐ Addition
NAME		4) NAME	
STREET ADDRESS		4) STREET ADDRESS	
CITY-ST-ZIP		4) CITY-ST-ZIP	
TITLE		5) TITLE	☐ Change ☐ Addition
NAME		5) NAME	
STREET ADDRESS		5) STREET ADDRESS	
CITY-ST-ZIP		5) CITY-ST-ZIP	
TITLE		6) TITLE	☐ Change ☐ Addition
NAME		6) NAME	
STREET ADDRESS		6) STREET ADDRESS	
CITY-ST-ZIP		6) CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or will be attached on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bradley C. Jones

4/28/95 Date

813-536-9979 Daytime Phone #

0371649 CP