

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000070647 (1)

1. Corporation Name

PARADISE PRODUCTIONS ENTERPRISES, INC.



Principal Place of Business

6677 STRATFORD DR  
PARKLAND FL 33067

Mailing Address

6677 STRATFORD DR  
PARKLAND FL 33067

3. Date Incorporated or Qualified  
10/05/1993

3a. Date of Last Report  
03/16/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

MOSS, MICHAEL  
6677 STRATFORD DR  
PARKLAND FL 33067

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 Sections 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

Signature, typed or printed name of registered agent on this filing

Date: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME MOSS, MICHAEL  
STREET ADDRESS 6677 STRATFORD DR  
CITY-ST-ZIP PARKLAND FL 33067

DELETE

TITLE D  
NAME HERMAN, HARVEY  
STREET ADDRESS 118 E 25 ST 12TH FL  
CITY-ST-ZIP NEW YORK NY 10010

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

Change Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

Change Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

Change Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

Change Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

Change Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

Change Addition

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)(k), 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael Moss - President  
MICHAEL MOSS - PRESIDENT

5/1/96

954-341-0700  
Daytime Phone #

CR2E034 (12/95)