2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000073422

FILED
01 JAN 26 AM 10:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

1. Entity Name
PARADISE PARK REALTY, INC.

Principal Place of Business
7860 NW 71 ST.
STE 300
MIAMI FL 33166

Mailing Address
P.O. BOX 441128
MIAMI FL

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

DO NOT WRITE IN THIS SPACE
1/26/01 90155 019 150.00

4. FEI Number 65-0447759 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
COFINO, JOSEFINO P
7860 NW 71
STE 302
MIAMI FL 33166

7. Name and Address of New Registered Agent
Name: Juan Zorilla, P.A.
Street Address (P.O. Box Number is Not Acceptable): S.E. 3rd Ave Suite 2200
City: Miami Florida FL Zip Code 33131

8. 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 Juan C. Zorrilla, Esq.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	VP	☐ Delete
NAME	BARRERO, FARA C.	
STREET ADDRESS	10380 SW 140 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	☐ Delete
NAME	CASERTA, RANIERE	
STREET ADDRESS	209 S.W. 103RD COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Fara C. Barrero V.P. 1/19/2001 305-513-3838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #

2/23