

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Moriam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -6 AM 9:25

DOCUMENT # P93000086262 (1)

1. Corporation Name

PARADISE REAL ESTATE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

PO BOX 40065
SARASOTA FL 34242-0065

Mailing Address

PO BOX 40065
SARASOTA FL 34242-0065

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/13/1993

3a. Date of Last Report

05/01/1994

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

24

25

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SIMIDIAN, DIKRAN V
1103-1109 14TH STREET WEST
BRADENTON FL 34205

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

(Sign on separate printed name of registered agent and file 2 in column)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

101

D

SIMIDIAN, DIKRAN V
PO BOX 40065 N.A
SARASOTA FL 34242-0065

NAME

STREET ADDRESS

CITY-ST-ZIP

102

NAME

STREET ADDRESS

CITY-ST-ZIP

103

NAME

STREET ADDRESS

CITY-ST-ZIP

104

NAME

STREET ADDRESS

CITY-ST-ZIP

105

NAME

STREET ADDRESS

CITY-ST-ZIP

106

NAME

STREET ADDRESS

CITY-ST-ZIP

107

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

☐ Change

☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

☐ Change

☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

☐ Change

☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

☐ Change

☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

☐ Change

☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

☐ Change

☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing is voluntarily true and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made on a report that has been filed on the part of the corporation or the officer or director who is required to make the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of changed, or on an addition report with any of the above.

SIGNATURE:

DIKRAN SIMIDIAN PRESIDENT
SIGNATURE AND TITLE OF REGISTERED AGENT OR AUTHORIZED OFFICER OR DIRECTOR

2/3/95 (813) 349-0579