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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1006

SIGNATURE:

DIVISION OF CORPORATIONS

	1990		CORPORATIONS		
DOCUMENT # P9400007108 (1) 1. Comparation Name					
•	PAUL ENTERPRISES, INC.				
Principal Place of Business		Mailing Address			BOUN BONK DOKE NOON NOON DOEN TOLL IDDE
6568 RIGGER ROAD LANTANA FL 33462		6568 RIGGER ROAD			
LANIANA FL	JJ402	LANTANA FL 33462		3. Date Incorporated or Qualified	3a. Date of Last Report
				01/20/1994	02/14/1995
2. Principal Place of Business		2a. Mailing Address	( 0	4. FEI Number	Applied For
21   3694 23 RD AVENUE, SUTTE 9		26 3194 23 RD Av Suite, Apt #, etc.	erue, Jame 7	65-0459161	Not Applicable  \$8.75 Additional
22	, 6.0	27		5. Certificate of Status Desired	Fee Required
City & State	.1 6	Çity & Stale	·	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
23 LAKE V	VOKTH FL COUNTRY	28 LAKE WORTH	Country	This corporation has liability for	Added to Fees
24 3346	2 25	29 33462	30	Florida Statutes 🔀 Yes	□No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New R	legistered Agent
PAUL, D	EAN C		82 Street Add	ress (P.O. Box Number is Not Acceptab	io)
6568 RIGGER ROAD					
LANTAN	A FL 33462		83		
			B4 City		FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 607,0502	and 607,1508, Florida Statute	s, the above named corpo	ration submits this statement for the pur rd of directors. I hereby accept the app	rpose of changing its registered office
	i, and accept the obligations of, Secti		arby the corporation a boo	ad or directors. The day decept the app	ontinon do regiono es esperio, rem
SIGNATURE :	Styristian sysiest or probed name of registerics agent	TOM) consultant tens	E. Pegiste ad Agont signature require	ed when reinstaling)	DATE
12. 1⊩tf	OFFICERS AND	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12  Change
NAME	PAUL, DEAN C		1.2 NAME		Change C Adoldsh
STREET ADDRESS	6568 RIGGER ROAD		1.3 STREET ADDRESS		
CITY ST-ZIP TIBLE	LANTANA FL 33462	[] DELETE	1.4 C(TY - ST - Z)P 2.1 T(T)E		Change Addition
NAME			2 2 NAME		Change E Addition
STEELT ADDRESS			2 3 STREET ADDRESS		
CHY-ST ZIP		DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change  Addition
NAMI		בַן טנוניוני	3 2 NAME		C change C Addition
S REFFADORESS			3.3 STREET ADDRESS		
CITY - ST - ZIF TITLE		☐ DELETE	3.4 CITY-ST-ZIP 4. 1 TITLE		Change Addition
NAM8			4.2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		•
001\[ \	,	TT DELETE	4 4 C/TY - ST - 7/P 5 1 TITLE		Change Addition
NAM-		[] OLCH	5.2 NAME		C Ominge C Notation
SINEEL ADORESS			5 3 STREET ADDRESS		
COTY - \$1 - 70P		דן סנונונ	54 CITY-ST-ZIP 6 1 TITLE		☐ Change ☐ Addition
1 TUE NAME			6 2 NAME		Ci entinge Ci Addition
STREET ADDRESS			6.3 STREET ADDRESS		
C-1Y - S1 - Z-P	y certify that the information supplied t	with the flima is ush atarily furni	64 CHY-ST-ZIP	for the exemption stated in Section 119	07/3/kl Florida Statutes Liturther
certify that oath; that i	the information indicated on this annuar an officer or director of the corpo	ual report or supplemental and coration or the receiver or trustee	alveport is true and accura- empowered to execute the	for the exemption stated in Section 119 attended that my signature shall have the is report as required by Chapter 607, Fl	same legal effect as if made under lorida Statutes; and that my name
appears in	Block 12 or Block 13 if charged, or o	on an attachment with an andre	988.		

2-12-96 467-544465