

2005 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000038522

1. Entity Name
PARADISE RESTORED, INC.



FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90306 040 ***150.00

Principal Place of Business
378 BAHIA AVE
KEY LARGO FL 33037

Mailing Address
378 BAHIA AVE
KEY LARGO FL 33037



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 41-2168 915 Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BROWN, HELENA W 378 BAHIA AVE KEY LARGO FL 33037		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 Max. Added to Fee

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN			
TITLE	PT	☐ Delete		TITLE		☐ Change ☐	
NAME	BROWN, HELENA W			NAME			
STREET ADDRESS	378 BAHIA AVE			STREET ADDRESS			
CITY- ST- ZIP	KEY LARGO FL 33037			CITY- ST- ZIP			
TITLE	VPS	☐ Delete		TITLE		☐ Change ☐	
NAME	BROWN, ELGIE V JR.			NAME			
STREET ADDRESS	378 BAHIA AVE			STREET ADDRESS			
CITY- ST- ZIP	KEY LARGO FL 33037			CITY- ST- ZIP			
TITLE	sec	☐ Delete		TITLE		☐ Change ☐	
NAME	Maurice Test			NAME			
STREET ADDRESS	441 So Andrews Ave.			STREET ADDRESS			
CITY- ST- ZIP	Ft. Lauderdale, FL 33301			CITY- ST- ZIP			
TITLE		☐ Delete		TITLE		☐ Change ☐	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY- ST- ZIP				CITY- ST- ZIP			
TITLE		☐ Delete		TITLE		☐ Change ☐	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY- ST- ZIP				CITY- ST- ZIP			
TITLE		☐ Delete		TITLE		☐ Change ☐	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY- ST- ZIP				CITY- ST- ZIP			

12. 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 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 changed, or on an

Helena W. Brown

3-3-05

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