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FILED

May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000044861 (0)

1. Corporation Name

PARAMOUNT INVESTMENT GROUP, INC.

Principal Place of Business

101 SUNNYTOWN RD.
STE 304 100
CASSELBERRY FL 32707

Mailing Address

101 SUNNYTOWN RD.
STE 304 100
CASSELBERRY FL 32707-3662



2. Principal Place of Business

21 Suite, Apt. #, etc. Suite 100
22 City & State
23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc. Suite 100
27 City & State
28 Zip Country

3. Date Incorporated or Qualified

06/13/1994

3a. Date of Last Report

09/23/1996

4. FEI Number

59-3250985

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

VELLE, VICTOR L
101 SUNNYTOWN RD.
STE 309
CASSELBERRY FL 32707

10. Name and Address of New Registered Agent

81 Name LAWRENCE J. CULOTTA V.P.
82 Street Address (P.O. Box Number is Not Acceptable) 101 SUNNYTOWN RD STE. 100
83
84 City CASSELBERRY FL 85 Zip Code 32707

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

Lawrence J. Culotta
Signature typed or printed name of registered agent and title if applicable.

LAWRENCE J. CULOTTA

3-24-97

DATE

12. OFFICERS AND DIRECTORS

TITLE	CPS	<input checked="" type="checkbox"/> DELETE
NAME	VELLE, VICTOR	
STREET ADDRESS	1815 COROLLA CT.	
CITY-ST-ZIP	DELTONA FL 32707	
TITLE	OV	<input type="checkbox"/> DELETE
NAME	CULOTTA, LAWRENCE J	
STREET ADDRESS	7919 NAPOLEON ST.	
CITY-ST-ZIP	ORLANDO FL 32825	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	HOPE, STEVE K	
STREET ADDRESS	218 SHADY OAKS DR.	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	STEVE K. HOPE	
1.3 STREET ADDRESS	218 SHADY OAKS DR	
1.4 CITY-ST-ZIP	LAKE MARY FL 32746	
2.1 TITLE	V.P. - SEC.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	LAWRENCE J. CULOTTA	
2.3 STREET ADDRESS	7919 NAPOLEON ST.	
2.4 CITY-ST-ZIP	ORLANDO FL 32825	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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

Lawrence J. Culotta
Signature typed or printed name of signing officer or director

LAWRENCE J. CULOTTA 2600038
407

Date

Daytime Phone

CR2E034 (9/96)