

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000029980 (6)

1. Corporation Name

PARADISE PROPERTIES OF BREVARD, INC.

Principal Place of Business

105 N PALM AVENUE
INDIALANTIC FL 32903
US

Mailing Address

105 N PALM AVENUE
INDIALANTIC FL 32903
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/18/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3309214

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1103 W. Hibiscus Blvd

Suite, Apt. #, etc.
#312

22 City & State
Melbourne, FL

23 Zip Country
32904 USA

2a. Mailing Address

26 1103 W. Hibiscus Blvd.

Suite, Apt. #, etc.
#312

27 City & State
Melbourne, FL

28 Zip Country
32904 USA

9. Name and Address of Current Registered Agent

HISEY, JACK
105 N PALM AVENUE
INDIALANTIC FL 32903

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1103 W. Hibiscus Blvd., #312

83

84 City Melbourne

FL

85 Zip Code
32904

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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

Signature, typed or printed name of registered agent (if applicable)

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HISEY, JACK
STREET ADDRESS 323 BANYAN WAY
CITY-ST-ZIP MELBOURNE BEACH FL 32951

TITLE D ☒ DELETE

NAME HISEY, DEBRA J
STREET ADDRESS 323 BANYAN WAY
CITY-ST-ZIP MELBOURNE BEACH FL 32951

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1103 W. Hibiscus Blvd., #312
Melbourne, FL 32904

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

REINSTATEMENT

200002326902--B
-10/22/97--01063--018
****750.00 ****750.00

14. I do hereby certify that the information submitted 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 or on an attachment with an address.

SIGNATURE

APPROVED
AND
FILED

1997 OCT 20 PM 3: 27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (4/97)