FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000062992 (9)**

1. Corporation Name

PARAGON TRUCKING CORP.

Principal Place of Business

2616 N BEAUMONT AVE
KISSIMMEE FL 34741

Mailing Address

2616 N BEAUMONT AVE
KISSIMMEE FL 34741

2. Principal Place of Business

21 608 W. Vine St.
Suite, Apt. #, etc.
22 Ste. 100
City & State
23 KISSIMMEE, FL
Zip
24 34741
Country
25

2a. Mailing Address

26 P.O. BOX 42-0536
Suite, Apt. #, etc.
27
City & State
28 KISSIMMEE, FL
Zip
29 34742
Country
30

3. Date Incorporated or Qualified: 08/15/1995

3a. Date of Last Report

4. FEI Number: 59-3330126 — 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

9. Name and Address of Current Registered Agent

GONZALEZ, LUIS
2616 N BEAUMONT AVE
KISSIMMEE FL 34741

10. Name and Address of New Registered Agent

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 Section 607.0505 and 607.0506, 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. The change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and hereby accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: (Signature of Registered Agent) (Date)

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	XX ADD
NAME	LUIS GONZALEZ	
STREET ADDRESS	2616 N. BEAUMONT AVE	
CITY, ST, ZIP	KISSIMMEE, FL 34741	
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		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PRESIDENT /S	☐ Change XX Addition
1. NAME	NICK FORLANO	
1. STREET ADDRESS	5351 DESMOND LANE	
1. CITY, ST, ZIP	ORLANDO, FL 32821	
2. TITLE		☐ Change ☐ Addition
2. NAME		
2. STREET ADDRESS		
2. CITY, ST, ZIP		
3. TITLE		☐ Change ☐ Addition
3. NAME		
3. STREET ADDRESS		
3. CITY, ST, ZIP		
4. TITLE		☐ Change ☐ Addition
4. NAME		
4. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE		☐ Change ☐ Addition
5. NAME		
5. STREET ADDRESS		
5. CITY, ST, ZIP		
6. TITLE		☐ Change ☐ Addition
6. NAME		
6. STREET ADDRESS		
6. CITY, ST, ZIP		

14. I declare that I have read the foregoing document and that the facts stated therein are true. I further certify that the officers and directors listed in Section 12 or Section 13 are the only officers and directors of the corporation. I further certify that the officer or director who signs this document is the officer or director of the corporation or has been expressly authorized by the corporation's board of directors to execute this document