2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P95000066524 1. Entity Name

PARADIGM DESIGN AND CONSTRUCTION, INC.



FILED
May 01, 2007 8:00 am
Secretary of State
05-01-2007 90019 048 ***158.75

Principal Place 321 E. HILLS DEERFIELD 6		Mailing Address 321 E. HILLSBORO BLVD DEERFIELD BEACH, FL 33441					ANN ARNA KINIS SI		8/18/		
2. Principal P	lace of Business -	3. Mailing Address	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02012007	Chg-P	CR2E0	34 (12/06)		
City & State			City & State			4. FEI Numbe				pplied For ot Applicable	
Zíp	Country		Zip	Zip Count			5. Certificate	KX X	\$8.75 Additional Fee Required		
	6. Name and A	Registered Agent	red Agent			7. Name and	Address of New	Registered A	gent		
	, TED .SBORO BLVD .D BEACH, FL			Name Street A	ddress (I	(P.O. Box Number is Not Acceptable)					
									FL	Zip Coo	ie
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											
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Carr Trust Fund C						\$5. Add	00 May Be ed to Fees				
10.	OFFICERS AND DIRECTORS 11.						ADDITIONS/	CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STREET, BRIA 321 E. HILLSBO DEERFIELD BI		☐ Delete	NAM STRE	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
TITLE	VP COHEN, JAME	SH	☐ Delete		TITLE NAME			1		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	321 E HILLSBO DEERFIELD BI	DRO BLVD EACH, FL 33441			STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			2200	Scott N.E. 143r i, Florida	d Street, S	Suite 100	Change	XIX Addition
TIFLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			321		otzer boro Blvd. h, FL 3344	·1	Change	XXXXAddition
TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	☐ Delete				, ,			☐ Change	☐ Addition

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

March 8, 2007 SIGNATURE: By: (954) 949-3480 Daytime Phone # SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
THEOGOTE R. Stotzer, Vice President