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CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

P95000079563 (9)

PARADISE JUNGLE INC.

Principal Place of Business	Mailing Address	
12442 S.W. 11TH TERRACE	12442 S.W. 11TH TERRACE	



40440 AUG 44TG TEO									
12442 S.W. 11TH TER MIAMI FL 33184	RACE	12442 S.W. 1 Miami Fl 331		E					
						 Date Incorporated or Qualified 10/17/1995 	3a. Date o	of Last F	Report
Principal Place of Bu	siness	2a. Mailing Addr	ress			4. FEI Number			Applied For
0.31. 4 5 11 -15		26				65-0625077			Not Applicable
Suite, Apt. #, etc.		Su:te, Apt. #			•	5. Certificate of Status Desired		•	5 Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution			00 May Be ad to Fees
Zq)	Country 25	Ζιρ 29	30	Country D		8. This corporation has liability for i Florida Statutes		under s	199.032,
9. Na	me and Address of Cu	irrent Registered Agent				10. Name and Address of New R	egistered A	gent	
				81	Name				
PEREZ, TERESITA 12442 S.W., 14TH TERRACE						ress (P.O. Box Number is Not Acceptab	le)		
MIAMI FL 3318	1)			83					
	Λ /			84	City		FL	85 Z	ip Code
familian with, and a SNATURE	ant the obligations of,	Section 607.0505, Florida > a,est and blu nappleans	Statutes.			ration submits this statement for the pur ird of directors. I hereby accept the appoint	DATE		Jagont, Tam
~~~	<u> </u>	S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFF		DIRECTO	ORS IN 12
PIS	· · · · · · · · · · · · · · · · · · ·	DEt	ETE	1 1 THILE				Change	Addition
F PER	ez, teresita								
				1.2 NAME					
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ETADDRESS 1244 -SI-ZIP MIAI	2 S.W. 11TH TERRA	VCE	LETE	13 STREET 14 CITY - S 2 1 TITLE				Change	☐ Addition
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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 Brock 12 or Brock 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96 Date

305-994-7533

Daytime Phone #