FILED Apr 19, 1999 8:00 am Secretary of State

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A CORPORATE PRINCIPAL MARIE MARIE MARIE MARIE MARIE REINE PRINCIPAL MARIE FRANCISCO

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000088091**1. Corporation Name

AN ADVENTURE IN PARADISE, INC.

Principal Place of Business 628 PLANTATION RD P O 80X 92 US 1. Principal Place of Business 2. Principal Place of Business 3. Subs. Apt. #. etc. 5. Confficial of Slatus Degred X							
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Society Soci			· ·	· ·		DO NOT WRITE IN THIS SPACE	
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2. Principal Place of Business 2a, Mailing Address 57, 500 May 100 52, 59, 3367000 58, 75, Applicable 58, Appli	05		03				
Suite, Apt. #, etc.	2 Principal Pl	land of Rusiness	22 Mailing Address				
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City & State City City & State		# etc				\$8.75 Additional	
State			⊢	¬		5. Certificate of Status Desired Fee Required	
28		e	City & State			6. Election Campaign Financing \$5.00 May Be	
Zip Country Zip Country	23		28			Trust Fund Contribution Added to Fees	
9. Name and Address of Current Registered Agent STAMBAUCH, GARY 6429 PLANTATION RD P O BOX 92 DUNEDIN FL 34697 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 agent. or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In a familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, typed palme of registered agent and title / representations of Section 607 0505. Florida Statutes. SIGNATURE Signature, typed or privide attent of proposets. POFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE STREET ADDRESS CITY-ST-2P STAMBAUGH, GARY STREET ADDRESS CITY-ST-2P DELETE 3 TITLE DELETE 4 TITLE DELETE 3 TITLE DELETE 4 TITLE DELETE 3 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 4 TITLE DELETE 5 TITLE DELETE						The state of the s	
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14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

