2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2005
Secretary of State

DOCUMENT# P95000090681

Entity Name: DON A. PARADISO, P.A.

Current Principal Place of Business:

2401 E ATLANTIC BLV D
314
POMPANO BEACH, FL 33062

New Principal Place of Business:

2 S. UNIVERSITY DRIVE
328
PLANTATION, FL 33324

Current Mailing Address:

2401 E ATLANTIC BLV D
314
POMPANO BEACH, FL 33062

New Mailing Address:

2 S. UNIVERSITY DRIVE
328
PLANTATION, FL 33324

FEI Number: 65-0621673 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DON, PARADISO A
6101 PALM TRACE DRIVE
APT #106
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

DON, PARADISO A
242 SW 52 AVENUE
PLANTATION, FL 33317 US

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.

SIGNATURE: DON A. PARADISO 01/13/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PARADISO, DON A
Address: 6101 PALM TRACE DRIVE #106
City-St-Zip: DAVIE, FL 33314

Title: PST ( ) Delete
Name: PARADISO, DON A
Address: 6101 PALM TRACE DRIVE #106
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PARADISO, DON A
Address: 2 S. UNIVERSITY DRIVE #328
City-St-Zip: PLANTATION, FL 33324

Title: PST (X) Change ( ) Addition
Name: PARADISO, DON A
Address: 2 S. UNIVERSITY DRIVE #328
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON A. PARADISO P 01/13/2005
Electronic Signature of Signing Officer or Director Date