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FILED

May 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000013422 (6)

1. Corporation Name

PARADISO MUSIC GROUP, INC.

Principal Place of Business

98 VINEYARDS BLVD.  
NAPLES FL 33999

Mailing Address

98 VINEYARDS BLVD.  
NAPLES FL 34119-4747



2. Principal Place of Business

21 6175 N.W. 167<sup>TH</sup> STREET

Suite, Apt. #, etc.

22 SUITE G-2

City & State

23 MIAMI, FLORIDA

Zip

24 33015

Country

25 USA

2a. Mailing Address

26 6175 N.W. 167<sup>TH</sup> STREET

Suite, Apt. #, etc.

27 SUITE G-2

City & State

28 MIAMI, FLORIDA

Zip

29 33015

Country

30 USA

3. Date Incorporated or Qualified

02/12/1996

3a. Date of Last Report

4. FEI Number

65-0663862

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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 Sections 607.0502 and 607.1508, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	P/D NICHOLAS J. MARTINELLI
1.3 STREET ADDRESS	6175 N.W. 167 <sup>TH</sup> ST., SUITE G-2
1.4 CITY - ST - ZIP	MIAMI, FL 33015
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	VP/D BRUCE WEEDEN
2.3 STREET ADDRESS	6175 N.W. 167 <sup>TH</sup> ST., SUITE G-2
2.4 CITY - ST - ZIP	MIAMI, FL 33015
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	S/T/D JOSEPH M. MORE
3.3 STREET ADDRESS	2375 TAMIAHI TRAIL N., SUITE 208
3.4 CITY - ST - ZIP	NAPLES, FL 34103
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97  
Date

941-649-1511  
Daytime Phone #

0415806

CR2E034 (9/96)