## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 17, 2005 08:00 AM DOCUMENT # P96000037340 **Secretary of State** EUROPE FLORIDA PARADISE REALTY, INC. Mailing Address Principal Place of Business 425 CROSS STREET **425 CROSS STREET** UNIT #113 UNIT #113 PUNTA GORDA, FL 33950 \_US PUNTA GORDA, FL 33950 US CR2E034 (10/03) 02022005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0668651 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NOYEN, JOHN F DO NOT WRITE 14141 MYAKKA POINTE DRIVE PORT CHARLOTTE, FL 33953 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaton Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 п After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME SHOTWELL, BRENDA L 11000000232543 02717705-80007-001 150.00 STREET ADDRESS 18630 KERRVILLE CIRCLE CITY-ST-ZIP PORT CHARLOTTE, FL 33948 TITLE NOYEN, JOHN F NAME STREET ADDRESS 14141 MYAKKA POINTE DRIVE CITY-ST-ZIP PORT CHARLOTTE, FL 33953 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. 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 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.

SIGNATURE:

Jul 17: Nagur

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