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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

STREET ADDRESS

14. I do hereby certify that the information indicated on this at much lam an officer or director of the corp.

appears in Block 12 or Block 13

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000040424 (9)

PARAGON TRADING GROUP, INC.

Principal Place of Business Mailing Address 13874 SW 151 LN. 13874 SW 151 LN. MIAMI FL 33186 MIAMI FL 33186-5782 3. Date Incorporated or Qualified 3a. Date of Last Report 05/10/1996 EEI Number 664332 Principal Place of Busines 2a. Mailing Address Applied For 13874 200 121 M 100 Almeria 1 26 Not Applicable Julte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State 6. Election Campaign Financing \$5.00 May Be WIEWI 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, USO uce Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BYNES, TERRY S 13874 SW 151 LN. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33186 83 84 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 (NOT) Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and tilled applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 96 69 13. Change DELETE Addition TITLE 1.11010 BYRNES BYNES, TERRY S NAME 1.2 NAME CR2E034 13874 SW 151 LN. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33186 1.4 CHY-S1-7IP CITY-ST-ZIP DELETE BYRNES Change Addition TITLE 2.1 TITLE BYNES, LULY 2.2 NAME NAME 13874 SW 151 LN. STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33186** CITY - ST - ZIP 2 4 CH1Y - \$1 - 7(P DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAM5 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP DELETE Change ___ Addition 4.1 Ti1Lf NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 7IP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAMI STREET ADDRESS 5.3 STREET ADDRESS

54 CiTY-ST-ZiP

6.3 STREET ADDRESS

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the optiomental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that he receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

Malan

6.4 CITY - ST - 7IP

RIDSON

6.1 TITLE

6.2 NAME

DELETE

attachment with an address