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Mar 31 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 # P96000065771 (3)

1. Corporation Name  
PALADIN FINANCIAL, INC.



Principal Place of Business  
7450 N 10TH CT  
PLANTATION FL 33313

Mailing Address  
P O BOX 16836  
PLANTATION FL 33318-6836

3. Date Incorporated or Qualified 08/05/1996	3a. Date of Last Report
4. FEI Number 65-0686469	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent DAVIS, ARNOLD M 7450 N 10TH CT PLANTATION FL 33313	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	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 \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	PP
NAME	WELLS, ROBERT L	1.2 NAME	
STREET ADDRESS	421 VICKSBURG TERR	1.3 STREET ADDRESS	421 VICKSBURG TERR
CITY-ST-ZIP	PLANTATION FL 33325	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	DV
NAME	DAVIS, ARNOLD M	2.2 NAME	
STREET ADDRESS	7450 N 10TH CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33313	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	DVP
NAME		4.2 NAME	DAVIS, ROSALIND P
STREET ADDRESS		4.3 STREET ADDRESS	7450 N.W. 10TH CT
CITY-ST-ZIP		4.4 CITY-ST-ZIP	PLANTATION, FL 33313
TITLE		5.1 TITLE	DVP
NAME		5.2 NAME	WELLS, DIANNE
STREET ADDRESS		5.3 STREET ADDRESS	421 VICKSBURG TERR
CITY-ST-ZIP		5.4 CITY-ST-ZIP	PLANTATION, FL 33325
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: ARNOLD M. DAVIS 3/26/97 954-581-1181  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)