

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0041710

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 NOV -2 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000006168 (3)**

1. Corporation Name

PARADIGMA "X" CORPORATION



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/21/1997

4. FEI Number

☒ 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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

Principal Place of Business

**1111 LINCOLN ROAD
SUITE 500
MIAMI BEACH FL 33139**

Mailing Address

**1111 LINCOLN ROAD
SUITE 500
MIAMI BEACH FL 33139**

2. Principal Place of Business

21 1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, etc.

22 -

City & State

23 PLANTATION, FLORIDA

Zip

24 33324

Country

25 USA

2a. Mailing Address

26 1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, etc.

27 -

City & State

28 PLANTATION, FLORIDA

Zip

29 33324

Country

30 USA

9. Name and Address of Current Registered Agent

**LOPEZ, PETER M ESQ.
1111 LINCOLN ROAD
SUITE 500
MIAMI BEACH, FL 33139**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1200 SOUTH PINE ISLAND ROAD

83

84 City

PLANTATION

FL

85 Zip Code

33324

10. Name and Address of New Registered Agent

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

☐ DELETE

**D
PRADA, MARIA A
19250 N.W. 87TH AVENUE
MIAMI FL 33015**

☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

☐ DELETE

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

**P
PRADA, MARIA A.
1875 W 56 ST SUITE 308
MIAMI FLORIDA 33012**

☐ Change ☒ Addition

**V
ALFREDO JORGE GAMETECA
1875 W 56 ST SUITE 308
MIAMI FLORIDA 33012**

☐ Change ☒ Addition

**D
SUAREZ, MARIO
1875 W 56 ST SUITE 308
MIAMI FLORIDA 33012**

☐ Change ☐ Addition

**4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP**

☐ Change ☐ Addition

**5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP**

☐ Change ☐ Addition

**6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP**

14. 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 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 REQUIRED

ALFREDO JORGE GAMETECA 9/23/98

CR2E034 (5/98)