

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

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Apr 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000037466 (4)

1. Corporation Name
HIBISCUS PARADISE CORP.

Principal Place of Business
1420 SOUTHEAST 3RD STREET
CAPE CORAL FL 33980

Mailing Address
1420 SOUTHEAST 3RD STREET
CAPE CORAL FL 33980



DO NOT WRITE IN THIS SPACE

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

Principal Place of Business: 1420 SOUTHEAST 3RD STREET, CAPE CORAL FL 33980
Mailing Address: 1420 SOUTHEAST 3RD STREET, CAPE CORAL FL 33980
Suite, Apt. #, etc.: Suite C
City & State: Cape Coral FL
Zip: 33904
Country: U.S.A.

3. Date Incorporated or Qualified	
04/28/1997	
4. FEI Number	Applied For
05-0747817	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	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134		81 Name H.S. Blair & Associates, Inc. 82 Street Address (P.O. Box Number is Not Acceptable) 1505 SE 40th Street 83 Suite C 84 City Cape Coral FL 85 Zip Code 33904	

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: S. de Rocco DATE: 4-14-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	
NAME	NEUMANN, WOLFGANG	1.2 NAME	
STREET ADDRESS	1420 SOUTHEAST 3RD STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL 33980	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	
NAME	NEUMANN, INGBERG	2.2 NAME	
STREET ADDRESS	1420 SOUTHEAST 3RD STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL 33980	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	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: S. de Rocco DATE: 4-14-98 941-549-9499

CR2E034 (10/97)