

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

FILED

Feb 27 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 # P97000051792 (4)

1. Corporation Name  
PARAMOUNT ERECTORS, INC.

Principal Place of Business

Mailing Address

~~3325 PEACH DRIVE~~  
JACKSONVILLE FL 32246

~~3325 PEACH DRIVE~~  
JACKSONVILLE FL 32246

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/11/1997

4. FEI Number

59-3459673

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

2. Principal Place of Business

21 10268 Beach Blvd.

Suite, Apt. #, etc.

22

City & State

23 Jacksonville, FL

Zip

24 32246 25 USA

2a. Mailing Address

26 10268 Beach Blvd.

Suite, Apt. #, etc.

27

City & State

28 Jacksonville, FL

Zip

29 32246 30 USA

9. Name and Address of Current Registered Agent

RADER, MARIANNA A  
3325 PEACH DRIVE  
JACKSONVILLE FL 32246

10. Name and Address of New Registered Agent

81 Name

Rader, David A.

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

10268 Beach Blvd.

83

84 City

Jax

FL

85 Zip Code

32246

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 *David A. Rader*

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
RADER, MARIANNA A  
3325 PEACH DRIVE  
JACKSONVILLE FL 32246 ☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
~~400 P/D~~  
RADER, DAVID A  
~~3325 PEACH DRIVE~~ 4006  
JACKSONVILLE FL ~~32246~~ 32246 ☐ 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
V/T  
Cook, Roxanne  
15663 Shellcracker Rd.  
Jacksonville ☐ Change ☒ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
☐ 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  
☐ Change ☐ Addition

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: *David A. Rader*

CR2E034 (10/97)