

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90274 030 \*\*\*150.00

**DOCUMENT # P97000061804**

1. Entity Name  
**PARADISE REAL ESTATE INVESTMENTS, INC.**



Principal Place of Business  
**9130 S. DADELAND BLVD., STE. 1101  
MIAMI, FL 33156**

Mailing Address  
**9130 S. DADELAND BLVD., STE. 1101  
MIAMI, FL 33156**

**94054271**



01062004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

|                                                           |                                          |
|-----------------------------------------------------------|------------------------------------------|
| 4. FEI Number<br><b>65-0826540</b>                        | Applied For<br><input type="checkbox"/>  |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional<br>Fee Required |

**6. Name and Address of Current Registered Agent**

**LAMCHICK, BRUCE  
9130 S. DADELAND BLVD., STE. 1101  
MIAMI, FL 33156**

**DO NOT WRITE  
IN THIS SPACE**

B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

|                                                    |                                                                                                  |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>D<br/>LAMCHICK, BRUCE — Trustee<br/>9130 S. DADELAND BLVD., STE. 1101<br/>MIAMI, FL 33156</b> |
|----------------------------------------------------|--------------------------------------------------------------------------------------------------|

|                                                    |                                                                                            |
|----------------------------------------------------|--------------------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>PD<br/>YOUNG-TENN, JOSCELYN<br/>9130 S. DADELAND BLVD, STE 1101<br/>MIAMI, FL 33156</b> |
|----------------------------------------------------|--------------------------------------------------------------------------------------------|

|                                                    |                                                             |
|----------------------------------------------------|-------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>D. FAY YOUNG-TENN<br/>Box 5700 SL<br/>MIAMI FL 33257</b> |
|----------------------------------------------------|-------------------------------------------------------------|

|                                                    |  |
|----------------------------------------------------|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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|----------------------------------------------------|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |  |
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**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address and all other like information.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**JOSCELYN YOUNG-TENN.**

**4-10-04**

Date

Daytime Phone #