

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 01, 2005 8:00 am
Secretary of State

04-01-2005 90004 025 ***150.00

DOCUMENT # P97000061804 1. Entity Name PARADISE REAL ESTATE INVESTMENTS, INC.	
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Principal Place of Business 9130 S. DADELAND BLVD., STE. 1101 MIAMI, FL 33156	Mailing Address 9130 S. DADELAND BLVD., STE. 1101 MIAMI, FL 33156
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DO NOT WRITE IN THIS SPACE



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0826540	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

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IN THIS SPACE**

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LAMCHICK, BRUCE 9130 S. DADELAND BLVD., STE. 1101 MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD YOUNG-TENN, JOSCELYN 9130 S. DADELAND BLVD, STE 1101 MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG-TENN, FAY PO BOX 570052 MIAMI, FL 33257
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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, with all other like empowered.

SIGNATURE: *Joselyn K. Young-Tenn* President 3/29/05 773-7698
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #