2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # P97000061804

1. Entity Name
PARADISE REAL ESTATE INVESTMENTS, INC.

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

DO NOT WRITE IN THIS SPACE

01042007 No Chg-P CR2E034 (11/05)

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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DT
NAME	LAMCHICK, BRUCE
STREET ADDRESS	9130 S. DADELAND BLVD., STE. 1101
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	PD
NAME	YOUNG-TENN, JOSCELYN
STREET ADDRESS	9130 S. DADELAND BLVD, STE 1101
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	D
NAME	YOUNG-TENN, FAY
STREET ADDRESS	PO BOX 570052
CITY-ST-ZIP	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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04/24/07-80045-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 asterisk, or that I am authorized 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 asterisk, or that I am all other like empowered.

SIGNATURE: _____ 4/10/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #