2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # **P97000086589**

1. Entity Name

PARADISE INVESTMENT GROUP, INC.

Principal Place of Business	Mailing Address
2780 IVY ST. ENGLEWOOD FL 34224	2780 IVY ST. ENGLEWOOD FL 34224

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E034 (10/04)

4. FEI Number 65-0789207 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GAMBER, EARL R 2780 IVY ST. ENGLEWOOD FL 34224	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____
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, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GAMBER, EARL R	NAME	
STREET ADDRESS	2780 IVY ST	STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD FL 34224	CITY-ST-ZIP	
TITLE	VP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CARVEY, LARRY T	NAME	
STREET ADDRESS	2780 IVY LN	STREET ADDRESS	U000000207408
CITY-ST-ZIP	ENGLEWOOD FL 34224	CITY-ST-ZIP	02/01/05-80043-022 150.00
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SMITH, RONALD A	NAME	
STREET ADDRESS	2780 IVY LN	STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD FL 34224	CITY-ST-ZIP	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	RIOTTO, KEITH	NAME	
STREET ADDRESS	2780 IVEY LN	STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD FL 34224	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: Earl R. Gamber Earl R. Gamber 01-20-05 941-476-4824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #