

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000094460**

1. Entity Name

PARAGON PAINTING CONTRACTORS, INC.**FILED**
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90037 006 ***150.00

Principal Place of Business

13760 82ND LANE NORTH
WEST PALM BEACH FL 33412

Mailing Address

13760 82ND LANE NORTH
WEST PALM BEACH FL 33412**913995**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3680 Investment Lane

Suite, Apt. #, etc.

3. Mailing Address

PO Box 31526

Suite, Apt. #, etc.

City & State

Riviera Beach, FL

City & State

Palm Beach Gardens

Zip

33404

Country

US

Zip

33420

Country

US

4. FEI Number

65-0795107

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

SHOREY, TODD M
13760 82ND LANE NORTH
WEST PALM BEACH FL 33412

7. Name and Address of New Registered Agent

Name **Todd M. Shorey**
Street Address (P.O. Box Number is Not Acceptable)
15670 SW Panel Ave.City **INDIANTOWN****FL**Zip Code **34956**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-29-019. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **SHOREY, TODD**
STREET ADDRESS **13760 82ND LANE N**
CITY-ST-ZIP **WEST PALM BEACH FL 33412**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **Todd Shorey**
STREET ADDRESS **15670 SW Panel Ave**
CITY-ST-ZIP **INDIANTOWN, FL 34956**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-29-01**561-840-9020**

CR2E034 (10/00)