

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000098530 (3)**

1. Corporation Name

PARADISE CORAL ROCK, INC.

Principal Place of Business

**18510 SOUTHWEST 58TH STREET
FT LAUDERDALE FL 33332**

Mailing Address

**18510 SOUTHWEST 58TH STREET
FT LAUDERDALE FL 33332**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/19/1997

4. FEI Number

65-0794767

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip Country

9. Name and Address of Current Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81. Name **GERALD PARADISE**
82. Street Address (P.O. Box Number is Not Acceptable)
18510 SW 58th St.
83.
84. City **FT LAUDERDALE** FL 85. Zip Code **33332**

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE **Gerald Paradise**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

GERALD PARADISE

12. OFFICERS AND DIRECTORS

TITLE **PO** ☐ DELETE
NAME **PARADISE, GERALD**
STREET ADDRESS **18510 SOUTHWEST 58TH STREET**
CITY-ST-ZIP **FT LAUDERDALE FL 33332**

TITLE **SO** ☐ DELETE
NAME **MESSELLE, PAUL**
STREET ADDRESS **18510 SOUTHWEST 58TH STREET**
CITY-ST-ZIP **FT LAUDERDALE FL 33332**

TITLE **TD** ☐ DELETE
NAME **MEZIGIAN, ART**
STREET ADDRESS **18510 SOUTHWEST 58TH STREET**
CITY-ST-ZIP **FT LAUDERDALE FL 33332**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

000002618770

-08/18/98--01037--033

*****150.00**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Gerald Paradise** **GERALD PARADISE**

FILED
Aug 17 1998 8:00am
Secretary of State



CR2E034 (5/98)

782

PARADISE CORAL ROCK INC.

July 21, 1998

Gentlemen:

This is a new corporation (Inc. 11-9-97).
This is the First notice we have received.
As we were not aware of these filing requirements, we ask that you waive the late fee. Our check in the amount of \$150.00 is enclosed. Thank you.

Very truly yours,

Gerald Paradise
Gerald Paradise, Pres.