SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000016598

PARAGON RESOURCES INC.

Principal Place of Business

Mailing Address

FILED Sep 16, 1999 8:00 am Secretary of State

09-16-1999 90009 013 ***550.00



| 1820 HYPOLUXO ROAD C-1 LAKE WORTH FL 33462 | | | 1820 HYPOLUXO ROAD C-1 LAKE WORTH FL 33462 | | DO NOT WRITE IN THIS SPACE | |
|---|---|---------------------------------------|---|---|---|-------------------------------|
| | | I | | | 3. Date Incorporated or Qualified 02/19/1998 | |
| 2. Principal F | Place of Business | 2a. Mailing Address | . | | 4. FEI Number 650562387 | Applied For Not Applicable |
| Suite, Apt. | # etc | | Suite, Apt. #, etc. | | | \$8.75 Additional |
| 22 | | 27 | | | 5. Certificate of Status Desired | Fee Required |
| City & Sta | te | City & State | ¬ ´ | | 6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution \$5.00 May Be Added to Fees | |
| Zip 24 | Country 25 | Zip | Country 30 | | 8. This corporation owes the current year Intangible Personal Property. Yes X No | |
| <u>,</u> | 9. Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New Registered | Agent |
| | | · · · · · · · · · · · · · · · · · · · | 1 | 1 Name | same) | |
| NEMBACH, KARL | | | | 2 Street Add | dress (P.O. Box Number is Not Acceptable) | |
| 9201 PARAGON WAY | | | | 452 | 27 Hunting Trail | |
| BOYNTON BEACH FL 33437 | | | | 3 |) | |
| ı | | | ī | 4 City / O | ke Worth FL | 85 Zip Code |
| | | on and COZ 1500 Florido Ciat | itea tha aba | | | |
| office or | registered agent, or both, in the State | e of Florida. Such change was | s autnonzed | ov the corpora | oration submits this statement for the purpose of c tion's board of directors. I hereby accept the appo | intment as registered |
| agent. i | am familiar with, and accept the oblig | ations of, section 607.0505, | Florida Statu | es. | | |
| SIGNATURE | Claushing hand as winted name of registered and | unt and title if annicable | NOTE: Registere | 1 Agent signature re | equired when reinstating) DATE | |
| | | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | | | 1.1 TITE | | P | Change X Addition |
| NAME | Dett. i | | 1.2 NAM | E . | KARL NEMBACH | |
| STREET ADDRESS | | | 1.3 STR | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP LAKE WORTH, FL 33467 | | |
| CITY-ST-ZIP | 1 | | 1.4 CITY | ST-ZIP | Lake Worth, FL 334 | 467 |
| TITLE | | | 2.1 TITL | | | Change Addition |
| NAME | · | | 2.2 NAM | ŧ | | |
| STREET ADDRESS | | | 2.3 STR | 2.3 STREET ADDRESS | | |
| CiTY-ST-ZIP | ì | ļ | 2.4 CITY-ST-ZIP | | | |
| TITLE | | | 3.1 TITL | | | Change Addition |
| NAME | | | 3.2 NAM | E | | |
| STREET ADDRESS | | | 3.3 STR | ET ADDRESS | | |
| CITY-ST-ZIP | | | 3.4 CITY | ST-ZIP | | |
| TITLE | DELETE 4.1 T | | 4.1 TITL | | | Change Addition |
| NAME | | _ | 4.2 NAM | Ξ | | |
| STREET ADDRESS | | | 4.3 STRE | ET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY | ST-ZIP | | |
| TITLE | DELETE 5.1 TI | | 5.1 TITL | | | Change Addition |
| NAME | | , | 5.2 NAM | ■ | | |
| STREET ADDRESS | | | 5.3 STRE | ET ADDRESS | | } |
| CITY-ST-ZIP | | | 5.4 CITY | ST-ZIP | | |
| TITLE | | DELETE 6.1 TI | | | - | Change Addition |
| NAME | ` · | | 6.2 NAM | | | } |
| STREET ADDRESS | | | 6.3 STR | ET ADDRESS | | J |
| | | | | ST-ZIP | | |

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

561-547-3230