FILED May 19, 2000 8:00 am Secretary of State 04-23-2000 90065 045 ***150.00 DOCUMENT # **P99000070092** 1. Entity Name PARAMOUNT BUILDING REALTY, INC.

Principal Place	of Business	Mailing Address						
		2499 GLADES ROAD						
SUITE 110		SUITE 110						
BOCA RATON FL	L 33431	BOCA RATON FL 33431-726	3 0		•			
						<u> </u>		
2. Principal Pla	ace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt, #, etc		DO NOT WRITE IN THIS SPACE			
City & State		City & State	City & State		El Number			plied For
					<u>65-0938893</u>			t Applicable
Zip	Country	Zip	Country	5. 0	Dertificate of Status Desired		8.75 Add es Required	
6. Name and Address of Current Re		Registered Agent	istered Agent		7. Name and Address of New Registered Agent			
		<u> </u>	Name -			1.743		
	JIANSKY, ALBERT N		Street Addres		ess (P.O. Box Number is Not Acceptable)			
	DEL CLAIR RANCH ROAD NTON BEACH FL 33437				. 16			
DO 111	1.011 ME (011 E 0010)		\				1 3 - 0	
			City	•		FL	Zip Code	₹
8. The above r	named entity submits this statement fo	or the purpose of changing its	registered office or	registered agr	ent, or both, in the State of	Florida.		
MD9101	control or may wrom the trip process for the			₩ · - -				
SIGNATURE _								
SIGNATORE -	Signature, typed or printed name of registered agent	and title if another block (NOT	E: Registered Agent signatu	re required when re	einstating)	DATE		
•	Segmande, typed or printed mante or registering agent	and him it applications: (1401						
	ration is eligible to satisfy its Intangible	1	!!! FEE IS \$150.0			Financina	ee o	D .4 p.
9. This corpor		FILE NOW After MAY 1, 20	!!! FEE IS \$150.0 000 Fee will be \$5)0 ;50.00	10. Election Campaign Trust Fund Contribu			0 May Be I to Fees
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 all other like empowered.

Markorie: M.

Marjorie M. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR