

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **S20738** (8)

1. Corporation Name  
**PARADISE PETROLEUM, INC.**

Principal Place of Business

~~1110 OLD DIXIE HWY. A-7  
VERO BEACH FL 32960~~

**PARADISE PETROLEUM, INC.**  
953 Old Dixie Hwy., B-2  
Vero Beach, FL 32960

Mailing Address

~~1110 OLD DIXIE HWY. A-7  
VERO BEACH FL 32960~~

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

24. Zip Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip Country

3. Date Incorporated or Qualified  
**12/21/1990**

3a. Date of Last Report  
**03/12/1996**

4. FEI Number  
**65-0237102**

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**BRYANT, DAN R.**  
~~1110 OLD DIXIE HWY A-7  
VERO BEACH FL 32960~~

**PARADISE PETROLEUM, INC.**  
953 Old Dixie Hwy., B-2  
Vero Beach, FL 32960

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

**FL** 85. Zip Code

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: *Dan R. Bryant, Pres.*

Signature of person who is the registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

*1/10/97*  
DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	<b>BRYANT, DAN R.</b>	
STREET ADDRESS	<b>13 COVE RD.</b>	
CITY - ST - ZIP	<b>MELBOURNE BEACH FL 32951</b>	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	<b>BRYANT, KATHY L.</b>	
STREET ADDRESS	<b>13 COVE RD.</b>	
CITY - ST - ZIP	<b>MELBOURNE BEACH FL 32951</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<b>DAN R. Bryant</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<b>PARADISE PETROLEUM, INC.</b>	
13 STREET ADDRESS	<b>953 Old Dixie Hwy., B-2</b>	
14 CITY - ST - ZIP	<b>Vero Beach, FL 32960</b>	
21 TITLE	<b>KATHY L. Bryant</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<b>PARADISE PETROLEUM, INC.</b>	
23 STREET ADDRESS	<b>953 Old Dixie Hwy., B-2</b>	
24 CITY - ST - ZIP	<b>Vero Beach, FL 32960</b>	
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do 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: *Dan R. Bryant, Pres.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/10/97* (511) 527-5320  
Date Daytime Phone #

CR2E034 (9/96)