## ËR MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S20738

(8)

PARADISE PETROLEUM, INC.

Principal Place	e of Business	Mailing Address			1 10011014 IIA 11611 06111 1006 11161 1611 61611 DIGI	WIST   WIST   BIST   EIST 1981
PARADISE PETROLEUM. INC. 953 OLD DIXIE HWY B-2 VERO BEACH FL 32980 US		PARADISE PETROLEUM. INC. 953 OLD DIXIE HWY B-2 VERO BEACH FL 32960 US		3. Date Incorporated or Qualified		
9 Principal Pi	ace of Business	2a. Mailing Address			12/2 1/1990 4. FEI Number	Applied For
21	acco or business	26	, 100 to		65-0237102	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	0	City & State	7-11		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Countr	7	8. This corporation owes or has paid the curr	
24	25	29	30			] Yes □ No
	g. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	Agent
BR	YANT, DAN R.		81	Name		
953 4000 OLD DIXIE HWY MIP 6 2			82	Street	Address (P.O. Box Number is Not Acceptable)	
VE	RO BEACH FL 32960					
			83			
			84	City	FL	85 Zip Code
SIGNATURE	Signature, typod or printed name of registered age	ent and title if applicable (NOT	TE Registered Ag	ent signature	required when reinstating) DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	
TITLE NAME STREET ADDRESS	PTD BRYANT, DAN R. 953 OLD DIXIE HWY., B-2	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE		SCON A (NOMINON 9DOWN DIXTE B-2 URLOBLY, IL 32940	Change Addition
CITY-ST-ZIP	VERO BEACH FL VSD	DELETE	1.4 CITY-	ST-ZIP	U400014432960	Change Addition
TITLE NAME	BRYANT, KATHY L.	☐ VELETE	2.1 TITLE 2.2 NAME			☐ Change ☐ AddRion
STREET ADDRESS	953 OLD DIXIE HWY., B-2		2.3 STREET	ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		2.4 City -	i		
TITLE	72.10 22.01112	☐ DELETE	3.1 TITLE	21-7IF	****	☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET	ADDRESS		
CITY-ST-ZIP			3 4. CITY-			
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	5 1 TIPLE			Change Addition
NAME			5.2 NAME	,		
STREET ADDRESS			5.3 STREET	ADDRESS		

14. Thereby 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 suppliemental 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 on 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.

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

**FILED** 

Apr 24 1998 8:00am

Secretary of State

Change

Addition