
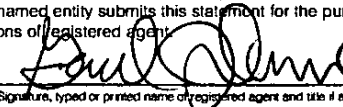
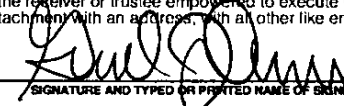


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90210 042 ***150.00

DOCUMENT # S20738 1. Entity Name PARADISE PETROLEUM, INC.					
Principal Place of Business PARADISE PETROLEUM, INC. 953 OLD DIXIE HWY., B-2 VERO BEACH, FL 32960 US			Mailing Address PARADISE PETROLEUM, INC. 953 OLD DIXIE HWY., B-2 VERO BEACH, FL 32960 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0237102	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BRYANT, DAN R. 1110 OLD DIXIE HWY A-7 VERO BEACH, FL 32960				7. Name and Address of New Registered Agent Name GERALD J. DONNINI Street Address (P.O. Box Number is Not Acceptable) 9250-H ALTERNATE A1A City LAKE PARK	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.				FL Zip Code 33403	
SIGNATURE 				DATE 4/26/05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DANR, BRYANT 1110 OLD DIXIE 13 VERO BEACH, FL 32960	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President GERALD J. DONNINI 9250-H ALTERNATE A1A LAKE PARK, FL 33403		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BRYANT, KATHY L. 953 OLD DIXIE HWY., B-2 VERO BEACH, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President, Secretary JAMES T. DONNINI 9250-H ALTERNATE A1A LAKE PARK, FL 33403		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 				Date 4/26/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR GERALD J. DONNINI				Daytime Phone # (561) 863-6909	