

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

FILED
Oct 06 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # S30619

1. Corporation Name

Paradise Enterprises of Brevard, Inc.

Principal Place of Business

131 SW Flagler Avenue
Stuart, FL 34994

Mailing Address

2. Principal Place of Business

21 131 SW Flagler Avenue

State Apt. #, etc.

22 City & State
23 Stuart, FL

24 Zip 34994

25 Country USA

26. Mailing Address

26 Same

State, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

Gary G. Runyan
3960 S. Banana River Blvd.
Cocoa Beach, FL 32931

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

December 8, 1991

4. FET Number

59-3066809

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

Demetria Dombrose

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

131 SW Flagler Avenue

83

84 City

Stuart

FL

85 Zip Code
34994

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 *Demetria Dombrose*

(Signature type to print in Block 13 or Block 14, as applicable.)

(Print Name, Date, and Agent Registration Number when registering.)

9/22/98

12. OFFICERS AND DIRECTORS

12.1 P
NAME Wallace Weeks
STREET ADDRESS 211 E. Cocoa Beach Causeway
CITY, ST, ZIP Cocoa Beach, FL 32931

12.2 NAME ☐ DELETE

12.3 NAME ☐ DELETE

12.4 NAME ☐ DELETE

12.5 NAME ☐ DELETE

12.6 NAME ☐ DELETE

12.7 NAME ☐ DELETE

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12.15 NAME ☐ DELETE

12.16 NAME ☐ DELETE

12.17 NAME ☐ DELETE

12.18 NAME ☐ DELETE

12.19 NAME ☐ DELETE

12.20 NAME ☐ DELETE

13.

13.1 NAME D, P, S,

13.2 NAME T

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

13.5 NAME

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST, ZIP

13.9 NAME

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST, ZIP

13.13 NAME

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST, ZIP

13.17 NAME

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☒ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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☐ Addition

14. The entity certifies that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information made available 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 of this filing, or on an attachment with an address.

SIGNATURE: *Demetria Dombrose*

(Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

9/22/98

CR2E034 (10/97)