

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90177 023 ***150.00

DOCUMENT # S50234

1. Corporation Name

PARADEE CORP.

Principal Place of Business

5353 S. S.R. 7
DAVIE FL 33314
US

Mailing Address

5353 S. S.R. 7
DAVIE FL 33314
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/06/1991

4. FEI Number

65-0265310

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

BALDINO, CARMELLA
2787 NE 298 TERR
N MIAMI FL 33180

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: P.

red agent signature required when reinsta.

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BALDINO, CARMELLA	
STREET ADDRESS	2787 NE 298 TERRACE	
CITY-ST-ZIP	N. MIAMI FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BALDINO, RALPH F	
STREET ADDRESS	2787 NE 228 TERRACE	
CITY-ST-ZIP	N MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BALDINO, RALPH JR	
STREET ADDRESS	2785 NE 208 TERRACE	
CITY-ST-ZIP	N MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BALDINO, LINDA	
STREET ADDRESS	2785 NE 208 TERRACE	
CITY-ST-ZIP	N MIAMI FL	
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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	1185 GRANDVIEW CIRCLE
3.4 CITY-ST-ZIP	ROYAL PALM BEACH FL 33411
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	1185 GRANDVIEW CIRCLE
4.4 CITY-ST-ZIP	ROYAL PALM BEACH FL 33411
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/99

Date

956 7913500

Office Phone #

CR2E034 (11/98)