

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S75536

1. Entity Name
PARADISE INDUSTRIES OF BREVARD, INC.



FILED
Jul 16, 2008 08:00 AM
Secretary of State

Principal Place of Business

271 CEDAR AVE
PO BOX 321456
COCOA BEACH, FL 32932 US

Mailing Address

271 CEDAR AVE
PO BOX 321456
COCOA BEACH, FL 32932 US



07032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3085571

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUY, II T
271 CEDAR AVE
COCOA BCH, FL 32931

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD GUY, II T 271 CEDAR AVE COCOA BCH, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST GUY, REBECCA J 70 CEDAR AVE COCOA BCH, FL |
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-03-08

321-302-1902

Date Daytime Phone #