

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067902

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: D & J PARADISE PROPERTIES, INC.

## Current Principal Place of Business:

86743 OLD HWY, BOX 8  
ISLAMORADA, FL 33036

## New Principal Place of Business:

30985 ELK HORN WAY  
BUENA VISTA, CO 81211

## Current Mailing Address:

86743 OLD HWY, BOX 8  
D2-3 BOX #8  
ISLAMORADA, FL 33036

## New Mailing Address:

30985 ELK HORN WAY  
BUENA VISTA, CO 81211

FEI Number: 03-0462256

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCOTT SOMERSTEIN, CPA  
2350 SW 18TH AVENUE  
FT. LAUDERDALE, FL 33315 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GLUS, JAMES F  
Address: 86743 OLD HWY, BOX 8  
City-St-Zip: ISLAMORADA, FL 33036 US

Title: VP ( ) Delete  
Name: PUMA, DORIS  
Address: 86743 OLD HIGHWAY  
City-St-Zip: ISLAMORADA, FL 33036 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GLUS, JAMES F  
Address: 30985 ELK HORN WAY  
City-St-Zip: BUENA VISTA, CO 81211 US

Title: VP (X) Change ( ) Addition  
Name: PUMA, DORIS  
Address: 30985 ELK HORN WAY  
City-St-Zip: BUENA VISTA, CO 81211 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES F GLUS

P

04/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date