FILED Apr 30, 2001 8:00 am Secretary of State 04-30-2001 90336 004 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 646208

1. Entity Name

GONZALEZ PAVEMENT EQUIPMENTS, INC.

Principal Place of Business

Mailing Address

9804 NW 80 AVE

9804 NW 80 AVE

HIALEAH GARDENS FL 33016		HIALEAH GARDENS FL 33016								
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State		4	1. FEI Number	59-1963236			plied For	
Zip	Country	Zip	Zip Country		5. Certificate of S			Not B.75 Addi	t Applicable itional	
							Fe	e Required	d	
	6. Name and Address of Curren	t Registered Agent	No	7 me	7. Name and Ad	dress of New Re	gistered Ag	ent		
CONT	741 57 545110		I Na	ille						
GONZALEZ, EVELIO 1060 W. 30TH STREET				Street Address (P.O. Box Number is Not Acceptable)						
HIALI	EAH FL 33012									ı
			Cit	у			Fl.	Zip Code	3	ŀ
8. The above	named entity submits this statement	for the purpose of changing it	s registered off	ice or registered	agent, or both, i	n the State of Flor	ida.			
SIGNATURE _	Signature, typed or printed name of registered age	ot and title if upplicable (NO	IT's Bozistowy Agen	t signature required whi	on reinstaling)		DATE			
	organico, typee of planted higher or lagation of age	it colo il dippi catza. (140	TE. Negisteres Agen	r signature required with	errens.attrig)		DATE			ı
Tax filing re	ration is eiigible to satisfy its Intangib equirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00				on Campaign Fina Fund Contribution	~ —	\$5.0	0 May Be I to Fees	
(See criteri	a on back)	Make Check Paya	able to Depar	tment of State	liusti	and Contribution	i. ⊔	Added	i to Fees	
11.			12.		ADDITIONS/CH	ANGES TO OFFI	CERS AND D	IRECTORS	3 IN 11	
TITLE	PD	☐ Delete	TITLE				[Change	Addition	00
NAME	GONZALEZ, EVELIO		NAME							(10/00)
SIREET ADDRESS	1060 W. 30TH ST.		STREET ADD	1						F034
CITY-ST-ZIP	HIALEAH FL		CITY-\$T-Z1	P						Ĭ
TITLE	TD	☐ Delete	TITLE				[Change	Addition 🔲	Ě
NAME	GONZALEZ, NICASIA		NAME							ľ
STREET ADDRESS CITY-ST-ZIP	1060 W. 30TH ST.		STREET ADD							
	HIALEAH FL		CITY-ST-Z	P						
TATLE	SD CARIDAD V	Delete	TITLE				(Change	Addition Addition	
NAME STREET ADDRESS	REYES, CARIDAD X		NAME	ancie e						
CITY-ST-ZIP	1033 W 30 ST		STREET ADI							
	Hialeah Fl VD			<u> </u>						-
TITLE NAME	REYES, ANTONIO	☐ Delete	TITLE	1			l	Change	Addition	
STREET ADDRESS	7215 MIAMI LAKES DR A-9		NAME STREET AD	TRESS						
CITY-ST-ZIP	MIAMI LAKES FL 33014		CITY-ST-Z							
TITLE	MIN'MALENIALO I E OOUTT	☐ Delete	TITLE					Change	Addition	1
NAME		□ Delefe	NAME							
STREET ADDRESS			STREET AD	DRESS						
CITY-ST-ZIP			CITY-ST-Z							
TITLE		☐ Delete	TITLE					☐ Change	Addition	1
NAME		□ D01016	NAME					orange	L. Addition	
STREET ADDRESS			STREET AD	DRESS						
CITY-ST-ZIP			CITY-ST-Z							Ì
13. I hereby o	certify that the information supplied w	ith this filing does not qualify	for the exempti	on stated in Sect	tion 119.07(3)(i).	Florida Statutes.	further certif	y that the i	nformation	1

signature shall have the same legal effect as if made under oath; that I am an officer or director yequired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver or trustee empowered to changed, or on an attachment with an addless, with all other

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #