

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010161

FILED
Feb 16, 2006
Secretary of State

Entity Name: D&E BRICK PAVERS CORPORATION

Current Principal Place of Business:

279 SW LANGFIELD AVENUE
PORT ST LUCIE, FL 34984

New Principal Place of Business:

1261 E SAMPLE RD
823
POMPANO BEACH, FL 33064

Current Mailing Address:

279 SW LANGFIELD AVENUE
PORT ST LUCIE, FL 34984

New Mailing Address:

1261 E SAMPLE RD
823
POMPANO BEACH, FL 33064

FEI Number: 20-0596638

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E. SAMPLE RD.
POMPANO BCH, FL 33064 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: PD () Delete
Name: COSTA, ALINE N
Address: 5620 NW 61ST ST., #1207
City-St-Zip: COCONUT CREEK, FL 33073

Title: VTD () Delete
Name: WISNESKY, DANIEL A
Address: 5620 NW 61ST ST., #1207
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COSTA, ALINE N
Address: 1261 E SAMPLE RD STE 823
City-St-Zip: POMPANO BEACH, FL 33064

Title: VTD (X) Change () Addition
Name: WISNESKY, DANIEL A
Address: 1261 E SAMPLE RD STE 823
City-St-Zip: POMPANO BEACH, FL 33064

I hereby certify that the information supplied with this filing does not qualify for the 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: ALINE N COSTA

PD

02/16/2006

Electronic Signature of Signing Officer or Director

_____ Date