

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90329 013 ***158.75

DOCUMENT # 823871 1. Entity Name STATE PAVING CORPORATION	
---	---

Principal Place of Business 3100 N 29TH COURT HOLLYWOOD, FL 33020 US	Mailing Address 3100 N 29TH COURT HOLLYWOOD, FL 33020 US
--	--

14001588

2. Principal Place of Business 3800 NORTH 29th AVE Suite, Apt. #, etc.	3. Mailing Address 3800 NORTH 29th AVE Suite, Apt. #, etc.
---	---



03262004 Chg-P CR2E034 (10/03)

City & State HOLLYWOOD, FL	City & State HOLLYWOOD, FL
Zip 33020	Zip 33020
Country USA	Country USA

4. FEI Number 23-1635137	Applied For ☐ Not Applicable
------------------------------------	--

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

6. Name and Address of Current Registered Agent ELKINS, HERBERT J. 4400 CASPER COURT HOLLYWOOD, FL 33021	
--	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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.

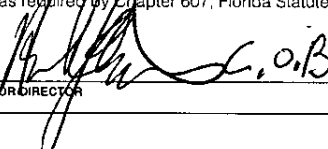
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00. After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
--	---

10. OFFICERS AND DIRECTORS	
TITLE	COBP ☐ Delete
NAME	ELKINS, HERBERT J
STREET ADDRESS	4400 CASPER CT
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	DV ☐ Delete
NAME	ELKINS, IONE
STREET ADDRESS	4400 CASPER CT
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	S ☐ Delete
NAME	GREEN, DONNA
STREET ADDRESS	3100 N 29TH COURT
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	AS ☐ Delete
NAME	RODRIGUEZ, MONIQUE
STREET ADDRESS	4725 ADAMS ST
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 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: **HERBERT J. ELKINS**  **L.O.B. 4/12/04 954-934747**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #