

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00217

Entity Name: PAVEX CORPORATION

FILED  
Aug 03, 2004  
Secretary of State

## Current Principal Place of Business:

2501 NW 48TH STREET  
POMPAHO BEACH, FL 33073

## New Principal Place of Business:

## Current Mailing Address:

101 SANBURY'S WAY  
PO BOX 15065  
WEST PALM BEACH, FL 33416

## New Mailing Address:

FEI Number: 59-2028249      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEFREHN, JOHN A.  
101 SANBURY WAY  
WEST PALM BEACH, FL 33416      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: CD      ( ) Delete  
Name: VECCELLIO, LEO A JR.  
Address: 210 VIA DEL MAR  
City-St-Zip: PALM BEACH, FL 33480

Title: V      ( ) Delete  
Name: BIRD, MERRITT C  
Address: 3796 NW 79TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: PD      ( ) Delete  
Name: WHITE, BYRD E III  
Address: 2772 BIARRITZ DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ST      ( ) Delete  
Name: DEFREHN, JOHN A  
Address: 8645 PINE CAY  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: AS      ( ) Delete  
Name: STANLEY, BARRY K  
Address: 9646 EAGLE POINT LANE  
City-St-Zip: LAKE WORTH, FL 33467

Title: VP      ( ) Delete  
Name: HINDS, HAZEN P  
Address: 35000 PORTFINO CIRCLE #129  
City-St-Zip: PALM BEACH GARDENS, FL 33418

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AS      (X) Change ( ) Addition  
Name: ANDERSON, DAVID L  
Address: 4568 NW 17TH WAY  
City-St-Zip: TAMARAC, FL 33309

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEFREHN JOHN A

ST

08/03/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date