

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F00217

1. Entity Name Pavex Corporation



FILED

03 OCT 27 PM 12:41

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
2501 N.W. 48th Street

3. Mailing Address  
101 Sansbury's Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 15065

City & State

City & State

Pompano Beach, FL

West Palm Beach, FL

Zip  
33073

Country

Broward

Zip  
33416

Country

Palm Beach

4. FEI Number

59-2028249

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

DeFrehn, John A.

Street Address (P.O. Box Number is Not Acceptable)

101 Sansbury's Way

City

West Palm Beach

FL

Zip Code

33411

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	Vecellio, Leo A Jr
STREET ADDRESS	210 Via Del Mar
CITY-ST-ZIP	Palm Beach, FL 33480
TITLE	PD
NAME	White, III Byrd E
STREET ADDRESS	2772 Biarritz Drive
CITY-ST-ZIP	Palm Beach Gardens, FL 33410
TITLE	VP
NAME	Bird, Merritt C
STREET ADDRESS	3796 NW79th Avenue
CITY-ST-ZIP	Coral Springs, FL 33065
TITLE	ST
NAME	DeFrehn, John A
STREET ADDRESS	8645 Pine Cay
CITY-ST-ZIP	West Palm Beach, FL 33411
TITLE	VP
NAME	Hinds, Hazen P
STREET ADDRESS	35000 Portofino Circle #129
CITY-ST-ZIP	Palm Beach Gardens, FL 33418
TITLE	AS
NAME	Stanley, Barry K
STREET ADDRESS	9646 Eagle Point Lane
CITY-ST-ZIP	Lake Worth, FL 33467

TITLE	
NAME	
STREET ADDRESS	200024394362
CITY-ST-ZIP	11/04/03--01013--003 **61.25
TITLE	
NAME	
STREET ADDRESS	200024394362
CITY-ST-ZIP	11/04/03--01013--004 **8.75
TITLE	
NAME	
STREET ADDRESS	<b>DO NOT WRITE</b>
CITY-ST-ZIP	<b>IN THIS SPACE</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Byrd E White, III

10-22-03 954-428-8712

Date

Daytime Phone #

CR2E034B (12/02)