

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F30952

Entity Name: PAVADE, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

% PABLO VALDES
8433 WEST OKEECHOBEE RD.
HIALEAH GARDENS, FL 33016

Current Mailing Address:

% PABLO VALDES
8433 WEST OKEECHOBEE RD.
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

% PABLO VALDES
12484 NW SOUTH RIVER DR
MEDLEY, FL 33178

New Mailing Address:

% PABLO VALDES
12484 NW SOUTH RIVER DR
MEDLEY, FL 33178

FEI Number: 59-2090492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES, PABLO
8433 WEST OKEECHOBEE RD.
HIALEAH GARDENS, FL 33106 US

Name and Address of New Registered Agent:

VALDES, PABLO
12484 NW SOUTH RIVER DR
MEDLEY, FL 33178 US

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:

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALDES, PABLO
Address: 8433 WEST OKEECHOBEE RD.
City-St-Zip: HIALEAH GARDENS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VALDES, PABLO
Address: 12484 NW SOUTH RIVER DR
City-St-Zip: MEDLEY, FL 33178

I hereby certify that the information supplied with this filing does not qualify 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: PABLO J VALDES

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date