

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020373

**FILED**  
**Apr 20, 2007**  
**Secretary of State**

**Entity Name:** PAVCO INTERNATIONAL, LLC

**Current Principal Place of Business:**

2289 N.W. 82ND AVENUE  
MIAMI, FL 33122

**New Principal Place of Business:**

300 S. PINE ISLAND ROAD  
SUITE # 315  
PLANTATION, FL 33324

**Current Mailing Address:**

2289 N.W. 82ND AVENUE  
MIAMI, FL 33122

**New Mailing Address:**

P.O. BOX 19068  
PLANTATION, FL 33318

**FEI Number:** 65-1157784

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRESPO, CARLOS M  
2289 N.W. 82ND AVENUE  
MIAMI, FL 33122 US

**Name and Address of New Registered Agent:**

CRESPO, CARLOS M PDS  
300 S. PINE ISLAND ROAD  
SUITE # 315  
PLANTATION, FL 33324 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:** CARLOS MAX CRESPO

04/20/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** CRESPO, CARLOS MAX  
**Address:** 2289 N.W. 82ND AVENUE  
**City-St-Zip:** MIAMI, FL 33122

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** CRESPO, CARLOS M MGRM  
**Address:** 300 S. PINE ISLAND ROAD, SUITE # 315  
**City-St-Zip:** PLANTATION, FL 33324

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** CARLOS MAX CRESPO

MGRM

04/20/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date