

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019431

Entity Name: WW BRICK PAVERS, LLC

FILED
Apr 21, 2006
Secretary of State

Current Principal Place of Business:

7281 MARDELL CT.
ORLANDO, FL 32835

New Principal Place of Business:

7906 CANYON LAKE CIRCLE
ORLANDO, FL 32835

Current Mailing Address:

7281 MARDELL CT.
ORLANDO, FL 32835

New Mailing Address:

7906 CANYON LAKE CIRCLE
ORLANDO, FL 32835

FEI Number: 77-0604026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FE, WESLEY O
7281 MARDELL CT.
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

FE, WESLEY O
7906 CANYON LAKE CIRCLE
ORLANDO, FL 32835 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: WESLEY DAVI DE OLIVEIRA FE

04/21/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FE, WALDEMAR J
Address: 7281 MARDELL CT.
City-St-Zip: ORLANDO, FL 32835

Title: MGRM () Delete
Name: FE, WESLEY O
Address: 7281 MARDELL CT.
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FE, WALDEMAR J
Address: 7906 CANYON LAKE CIRCLE
City-St-Zip: ORLANDO, FL 32835

Title: MGRM (X) Change () Addition
Name: FE, WESLEY O
Address: 7906 CANYON LAKE CIRCLE
City-St-Zip: ORLANDO, FL 32835

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: WESLEY DAVI DE OLIVERIA FE

MGR

04/21/2006

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