

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095403

FILED
May 30, 2007
Secretary of State

Entity Name: JP PAVERS SOLUTIONS, LLC

Current Principal Place of Business:

5503 AXIOM AVE
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

5503 AXIOM AVE
ORLANDO, FL 32839

New Mailing Address:

FEI Number: 20-5685040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KOGAKE, JULIANA N
5503 AXIOM AVE
ORLANDO, FL 32839 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KOGAKE, JULIANA
Address: 5503 AXIOM AVE
City-St-Zip: ORLANDO, FL 32839

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: LIMA NETO, PEDRO V
Address: 5503 AXIOM AVE
City-St-Zip: ORLANDO, FL 32839 US

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 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: JULIANA KOGAKE

MGM

05/30/2007

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