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Feb 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L60681** **(8)**

1. Corporation Name
PAAVOLA BROTHERS, INC.

Principal Place of Business	Mailing Address
% GREGORY G. KEANE ~~900 E OCEAN BLVD SUITE 244~~ ~~STUART FL 34994~~	% GREGORY G. KEANE ~~900 E OCEAN BLVD SUITE 244~~ ~~STUART FL 34994~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/22/1990

2. Principal Place of Business
21 GREGORY G. KEANE
Suite, Apt. #, etc.
22 KEANE, MURPHY & HOUGH
A LAW PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
23 729 S. Federal Hwy., Suite 222
City & State
24 Zip Stuart, Florida 34994
25

2a. Mailing Address
26 GREGORY G. KEANE
Suite, Apt. #, etc.
27 KEANE, MURPHY & HOUGH
A LAW PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
28 729 S. Federal Hwy., Suite 222
City & State
29 Zip Stuart, Florida 34994
30 Country

4. FEI Number
65-0183632
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
KEANE, GREGORY G.
~~900 E OCEAN BLVD~~
~~SUITE 244~~
STUART FL 34994
new address only

10. Name and Address of New Registered Agent
81 Name GREGORY G. KEANE
82 Street Address (P.O. Box Number is Not Acceptable) 729 S. Federal Highway
83 Suite 222
84 City Stuart FL 85 Zip Code 34994

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE G. G. Keane 1/20/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAAVOLA, ESKO 7640 S.W. PARKWAY DR. STUART FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PAAVOLA, VELI 1800 SE HACKMAN TER STUART FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Esko Paavola 2-17-98 561-283-4748