
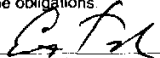



2<sup>nd</sup> and File on or before Sept. 29, 1999 or Limited Liability Company  
FINAL NOTICE: will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 588.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company  KEYSTONE PAVERS, L.C. 410 BELVEDERE COURT PUNTA GORDA FL 33950		DOCUMENT # L98000001927 TALLAHASSEE FLORIDA	
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip Country		2a. Mailing Address 118 LAKE WORTH BLVD. Suite, Apt. #, etc. City & State PORT CHARLOTTE Zip Country 33948	
3. Date Organized or Qualified 09/21/1998		3a. State of Formation FL	
4. FEI Number 65-0868251		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired <input type="checkbox"/> SR (No Additional Fee Required)	
7. Name and Address of Current Registered Agent  TAMBASCO, ERNEST 410 BELVEDERE COURT PUNTA GORDA FL 33950		8. Name and Address of New Registered Agent/Office Name ERIC ALDRICH Street Address (P.O. Box Number is Not Acceptable) 18170 LAKE WORTH BLVD Suite, Apt. #, etc. City PORT CHARLOTTE FL Zip Code 33948	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE  DATE 9-29-99 (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	TAMBASCO, ERNEST	410 BELVEDERE COURT	PUNTA GORDA FL
11. I do 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 is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address. SIGNATURE: ERNEST TAMBASCO  DATE 9-29-99 941-744 9112 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #			