


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jul 07, 2004 08:00 AM
Secretary of State**

DOCUMENT # P00000040196 1. Entity Name PAVEMENT PRESERVATION, INC.	
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Principal Place of Business 701 US HWY 41 RUSKIN, FL 33570 US	Mailing Address PO BOX 865 RUSKIN, FL 33575 US
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07012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FCI Number 59-3644197	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MONTGOMERY, MICHAEL R 1209 VENTANA DR. RUSKIN, FL 33573
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____
Signature: Type or printed name of registered agent and the filer-applicant (FCI No. Registered Agent signature required when registering) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

U000000163594
07/07/04-800009-006 550.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	V MONTGOMERY, MICHAEL 1209 VENTANA DR. RUSKIN, FL 33573
TITLE NAME STREET ADDRESS CITY ST ZIP	T ALEXANDER, DARA M 1405 VENTANA DRIVE RUSKIN, FL 33573
TITLE NAME STREET ADDRESS CITY ST ZIP	P MONTGOMERY, LEAH 1209 VENTANA DR. RUSKIN, FL 33573
TITLE NAME STREET ADDRESS CITY ST ZIP	S MONTGOMERY, MICHAEL R 1209 VENTANA DR. RUSKIN, FL 33573
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mike Montgomery VP 07/07/04 803641-7358
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE