

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000040196

1. Entity Name
PAVEMENT PRESERVATION, INC.



Principal Place of Business
**701 US HWY 41
RUSKIN, FL 33570 US**

Mailing Address
**PO BOX 865
RUSKIN, FL 33575 US**



07072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3644197 Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**MONTGOMERY, MICHAEL R
1209 VENTANA DR.
RUSKIN, FL 33573**

**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, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

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

**U000000373891
07/21/05-80003-011 550.00**

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/07/05 813-641-7358
Date Daytime Phone #