2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000013463

CLEARWATER, FL 33764

City-St-Zip:

FILED Apr 04, 2006 Secretary of State

Entity Name: PAVE-A-WAYS, INC. **Current Principal Place of Business: New Principal Place of Business:** 1587 OAKADIA LANE CLEARWATER, FL 33764 **Current Mailing Address: New Mailing Address:** 1587 OAKADIA LANE CLEARWATER, FL 33764 FEI Number: 30-0058810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THOMAS, EMMA M 1587 OAKADIA LANE CLEARWATER, FL 33764 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition THOMAS, EMMA M THOMAS, EMMA M Name: Name: 6154 126TH AVE N UNIT A2 1587 OAKADIA LANE Address: Address: City-St-Zip: LARGO, FL 33773 City-St-Zip: CLEARWATER, FL 33764 Title: Title: () Change () Addition () Delete THOMAS, EMMA M Name: Name: 1587 OAKADIA LN Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMMA M THOMAS D 04/04/2006