## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000096116

Entity Name: AMERICA PAVERS CONTRACTORS, INC.

FILED Sep 10, 2009 Secretary of State

	iid: / liviEi (lo.	ATTAVERO CONTINUACIONO, II	110.			
Current Principal Place of Business:				New Principal Place of Business:		
600 NE 33RD STREET				960 S DEERFIELD AVENUE		
B POMPANO BEACH, FL 33064				DEERFIELD BEACH, FL 33441		
Current Mailing Address:				New Mailing Address:		
	500 NE 33RD STREET			960 S DEERFIELD AVENUE		
B DEERFIELD BEACH, F POMPANO BEACH, FL 33064					L 33441	
FEI Number:	30-0506248	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SALGADO, WALISON 600 NE 33RD STREET B				TAX HOUSE CORPORATION 1100 S FEDERAL HWY SECOND FLOOR		
POMPANO BEACH, FL 33064 US				DEERFIELD BEACH, FL 33441 US		
The above in the State		submits this statement for the p	ourpose o	f changing its registered	office or registered agent, or both,	
SIGNATURE: BRENO R GOMES - PRESIDENT				09/10/2009		
	Electro	nic Signature of Registered Age	ent		Date	
		03(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	ot receive t	he prior notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SALGADO, WA	) Delete ALISON STREET, UNIT B ACH, FL 33064		Title: ( Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	FABRICA, CAR 600 NE 33RD	) Delete RLO C STREET, UNIT B ACH, FL 33064		Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: WALISON SALGADO PD 09/10/2009