

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90113 027 ***150.00

DOCUMENT # P01000102294 1. Entity Name ATLANTIC INTERLOCKING PAVERS, INC.					
Principal Place of Business 521C NORTH HARBOR CITY BLVD. MELBOURNE, FL 32935			Mailing Address 521C NORTH HARBOR CITY BLVD. MELBOURNE, FL 32935		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number 59-3752073				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KNIGHT, FREDDY 1544 WELTER STREET SOUTH EAST PALM BAY, FL 32909			7. Name and Address of New Registered Agent Name Eric Moore Street Address (P.O. Box Number is Not Acceptable) 521C North Harbor City Blvd. City Melbourne FL Zip Code 32935		
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: <u><i>Eric Moore</i></u> Eric Moore DATE: 4/25/03 (NOTE: Registered Agent signature required when maintaining)					
FILE NOW WITH FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNIGHT, FREDDY 1336 LOTUS STREET SOUTH EAST PALM BAY, FL 32909	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT Eric Moore 521C North Harbor City Blvd. Melbourne, FL 32935	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Laurie Moore 521C North Harbor City Blvd. Melbourne, FL 32935	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I 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 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: <u><i>Eric Moore</i></u> Eric Moore			DATE: 4/25/03 DAYTIME PHONE: 321-253-2121		

CR2E034 (10/02)