2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT (AR) Jul 27, 2006 08:00 AN Secretary of State DOCUMENT # P03000129262 SOUTHEAST BRICK PAVERS & LAWN SERVICE INC. Principal Place of Business Mailing Address 6326 5TH STREET CIR E 6326 5TH STREET CIR E BRADENTON FL 34203 . **BRADENTON FL 34203** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/06) City & State Applied For City & State 4. FEI Number 20-0337747 Not Applicable Zıp Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SYSAK, PAUL 6326 5TH STREET CIR E Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34203** City Zip Code 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 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 6, 2006 late fee. By checking this box, the corporation certifies it did Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PVTS** TILLE Delete TIT) F ☐ Change Addition SYSAK, PAUL NAME NAME 6326 5TH STREET CIR E STREET ADDRESS STREET ADDRESS BRADENTON FL 34203 CITY-ST-7IP Crity-ST-ZIE THLE ☐ Delete TITLE Change Addition NAME U00000572447 STREET ADDRESS STREET ADDRESS 97/27/08-80007-092 150.00 CITY-ST-ZIP CITY - ST - ZIP THLE ☐ Delete TITLE Change ☐ Addition NAM STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZE City St - ZiP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or propriemental 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 in changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

LATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/34/06 338-773 Date/ 06 Oblyime Phone #