

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000139150

FILED
Mar 23, 2009
Secretary of State

Entity Name: TAMPA BAY BRICK PAVERS, INC.

Current Principal Place of Business:

1819 BRENTWOOD DR
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

1819 BRENTWOOD DR
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 20-0433855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONCALVES, NILSON M
6892 79 AVE NORTH
PINELLAS PARK, FL 33781 US

Name and Address of New Registered Agent:

GONCALVES, NILSON M
1819 BRENTWOOD DR
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:

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONCALVES, NILSON M
Address: 1819 BRENTWOOD DR
City-St-Zip: CLEARWATER, FL 33764

Title: OFFI () Delete
Name: MACHADO, MANOEL
Address: 8794 94 TH AV N
City-St-Zip: LARGO, FL 33777

Title: OFFI () Delete
Name: DE LIMA, RICARDO R
Address: 6465 142 AV N # APT W208
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NILSONMALTACAGONCALVES

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date