2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154048

Address:

City-St-Zip:

4609 PALMETTO DRIVE

WINTER HAVEN, FL 33881

FILED Feb 29, 2008 Secretary of State

Entity Nam	ie: ARPIN	I BRICK & F	PAVERS, INC.			•		
Current Principal Place of Business:				New Prin	New Principal Place of Business:			
4609 PALM WINTER HA								
Current Mailing Address:				New Mail	New Mailing Address:			
4609 PALM WINTER HA								
FEI Number:	20-0504225	FEI Nur	nber Applied For()	FEI Number Not App	olicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
TAX HOUSE CORPORATION 1261 E SAMPLE ROAD POMPANO BEACH, FL 33064 US				1100 S FE SECOND	TAX HOUSE CORPORATION 1100 S FEDERAL HWY SECOND FLOOR DEERFIELD BEACH, FL 33442 US			
The above in the State	named enti of Florida.	ty submits t	his statement for the pu	rpose of changing	its registe	red office or registered agent, or both,		
SIGNATURE: BRENO R GOMES - PRESIDENT					02/29/2008			
Electronic Signature of Registered Agent				t	Date			
Election Cam	paign Finand	cing Trust Fu	nd Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LOVO, KARI 4609 PALME	() Delete INA F ETTO DRIVE VEN, FL 3388	31	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	ARPINI, ALC 4609 PALME	() Delete DEMIR F ETTO DRIVE VEN, FL 3388	31	Title: Name: Address: City-St-Zip:	4609 PAL	(X) Change () Addition ALDEMIR F LMETTO DRIVE HAVEN, FL 33881		
Title: Name:	SD ARPINI. ADI	() Delete LSON		Title: Name:		() 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.

Address:

City-St-Zip:

SIGNATURE: ALDEMIR F. ARPINI VPD 02/29/2008