

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010869

Entity Name: H & L BRICK PAVERS, INC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

1113 ANZA AVE  
LEHIGH ACRES, FL 33971

## New Principal Place of Business:

2303 LINWOOD DR  
SARASOTA, FL 34232

## Current Mailing Address:

1113 ANZA AVE  
LEHIGH ACRES, FL 33971

## New Mailing Address:

2303 LINWOOD DR  
SARASOTA, FL 34232

FEI Number: 84-1637765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE OLIVEIRA, HEBERT A  
1113 ANZA AVE  
LEHIGH ACRES, FL 33971 US

## Name and Address of New Registered Agent:

DE OLIVEIRA, HEBERT A  
3187 ANTICA ST  
FORT MYERS, FL 33905 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:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DE OLIVEIRA, HERBERT A  
Address: 1113 ANZA AVE  
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: D ( ) Delete  
Name: LIDIA ALVES DE OLIVEIRA  
Address: 1113 ANZA AVE  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HEBERT ALVES DE OLIVEIRA  
Address: 3187 ANTICA ST  
City-St-Zip: FORT MYERS, FL 33901 US

Title: D (X) Change ( ) Addition  
Name: LIDIA ALVES DE OLIVEIRA  
Address: 3187 ANTICA ST  
City-St-Zip: FORT MYERS, FL 33905

Title: D ( ) Change (X) Addition  
Name: MATOSINHO ALVES BRAGA  
Address: 2303 LINWOOD DR  
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Change (X) Addition  
Name: ONECIO LEMES DA SILVA  
Address: 5321 22ND ST  
City-St-Zip: BRADENTON, FL 34207

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: HEBERT ALVES DE OLIVEIRA

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date