

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059334

Entity Name: QUALITY PAVERS INC

FILED
Apr 04, 2005
Secretary of State

Current Principal Place of Business:

6209 WESTGATE DR.
APT#1101
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

6209 WESTGATE DR.
APT#1101
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 86-1102345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTOS, JOSE ROCHA
6209 WESTGATE DR.
APT# 1101
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: SANTOS, ALEX
Address: 6209 WESTGATE DR., #1101
City-St-Zip: ORLANDO, FL 32835 US

Title: P () Delete
Name: JOSE ROCHA SANTOS,
Address: 6209 WESTGATE DR APT # 1101
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: SANTOS, JOSE ROCHA
Address: 6209 WESTGATE DR APT # 1101
City-St-Zip: ORLANDO, FL 32835 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSE ROCHA SANTOS

P

04/04/2005

Electronic Signature of Signing Officer or Director

Date