

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000093485

Entity Name: GS PAVERS, CORP.

FILED
Jan 16, 2006
Secretary of State

Current Principal Place of Business:

2035 SHOMA DR.
WEST PALM BEACH, FL 33414

New Principal Place of Business:

7778 N BLAIR WOOD CIRCLE
LAKE WORTH, FL 33467

Current Mailing Address:

2035 SHOMA DR.
WEST PALM BEACH, FL 33414

New Mailing Address:

7778 N BLAIR WOOD CIRCLE
LAKE WORTH, FL 33467

FEI Number: 20-3095055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAVARES DA SILVA, GILMAR
2035 SHOMA DR.
WEST PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

TAVARES DA SILVA, GILMAR
7778 N BLAIR WOOD CIRCLE
LAKE WORTH, FL 33467 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: GILMAR TAVARES DA SILVA

01/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: TAVARES DA SILVA, GILMAR
Address: 2035 SHOMA DR.
City-St-Zip: POMPANO BEACH, FL 33064

Title: DVT () Delete
Name: OLIVEIRA, IEDA BRAGA
Address: 2035 SHOMA DR.
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: TAVARES DA SILVA, GILMAR
Address: 7778 N BLAIR WOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: DVT (X) Change () Addition
Name: OLIVEIRA, IEDA BRAGA
Address: 7778 N BLAIR WOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the 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: GILMAR TAVARES DA SILVA

DPS

01/16/2006

Electronic Signature of Signing Officer or Director

Date