

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130896

Entity Name: ED BRICK & PAVERS CORP

FILED
Jul 11, 2006
Secretary of State

Current Principal Place of Business:

1091 S. HIAWASSEE RD.
221
ORLANDO, FL 32835 US

New Principal Place of Business:

1324 NORTH BUENA VISTA AVE
ORLANDO, FL 32818 US

Current Mailing Address:

1091 S. HIAWASSEE RD.
221
ORLANDO, FL 32835 US

New Mailing Address:

1324 NORTH BUENA VISTA AVE
ORLANDO, FL 32818 US

FEI Number: 20-3532616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACCOUNT BOOKKEEPING CORP
5950 LAKEHURST DR
SUITE 246
ORLANDO, FL 32819 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DA SILVA, EDELSON J
Address: 1091 S. HIAWASSEE RD 221
City-St-Zip: ORLANDO, FL 32835 US

Title: VP () Delete
Name: LEMOS, GLASINEYS N
Address: 1091 S. HIAWASSEE RD 221
City-St-Zip: ORLANDO, FL 32835 US

Title: T () Delete
Name: PIMENTA, FABRICIO M
Address: 1091 S. HIAWASSEE RD 221
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DA SILVA, EDELSON J
Address: 1324 NORTH BUENA VISTA AVE
City-St-Zip: ORLANDO, FL 32818 US

Title: VP (X) Change () Addition
Name: LEMOS, GLASINEYS N
Address: 1324 NORTH BUENA VISTA AVE
City-St-Zip: ORLANDO, FL 32818 US

Title: T (X) Change () Addition
Name: PIMENTA, FABRICIO M
Address: 1324 NORTH BUENA VISTA AVE
City-St-Zip: ORLANDO, FL 32818 US

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: EDELSON DA SILVA

DP

07/11/2006

Electronic Signature of Signing Officer or Director

Date