2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048440

Entity Name: CALAZANS BRICK PAVERS, CO.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

4295 SUNBEAM RD 3900 OLDIFIELD CROSSING DR

1511 809

JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32223 US

Current Mailing Address: New Mailing Address:

4295 SUNBEAM RD 3900 OLDIFIELD CROSSING DR

809

JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32223 US

FEI Number: 20-4631080 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHOCKMEDIA CORPORATION CALAZANS, PAULO J

7862 W IRLO BRONSON HWY 3900 OLDIFIELD CROSSING DR 121 809

KISSIMMEE, FL 34747 US JACKSONVILLE, FL 32223 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: PAULO JR CALAZANS 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: CALAZANS, PAULO J Name: CALAZANS, PAULO J

Address: 4295 SUNBEAM RD #1511 Address: 3900 OLDIFIELD CROSSING DR # 809

City-St-Zip: JACKSONVILLE, FL 32257 US City-St-Zip: JACKSONVILLE, FL 32223 US

Title: S (X) Delete Title: () Change () Addition

 Name:
 VASCONCELOS, MESSIAS
 Name:

 Address:
 4295 SUNBEAM RD #1511
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32257 US
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 DELANA, GRIMALDO
 Name:

 Address:
 4295 SUNBEAM RD #1511
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32257 US
 City-St-Zip:

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: PAULO JR CALAZANS P 04/26/2007