

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000069923

FILED
Sep 07, 2007
Secretary of State

Entity Name: SUNRISE PAVER CONTRACTORS, INC.

Current Principal Place of Business:

5135 SANTA ANA DR
ORLANDO, FL 32837 US

New Principal Place of Business:

10325 STRATFORD POINT AV
ORLANDO, FL 32832 US

Current Mailing Address:

5135 SANTA ANA DR
ORLANDO, FL 32837 US

New Mailing Address:

10325 STRATFORD POINT AV
ORLANDO, FL 32832 US

FEI Number: 20-4903733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, CAROLINE
8818 COMMODITY CIR
40
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LARSON ACCOUNTING E CONSULTING SV LLC
8818 COMMODITY CIR
SUITE 40
ORLANDO, FL 32819 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: CAROLINE LARSON

09/07/2007

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: PUJOL, WILLIAN
Address: 5135 SANTA ANA DR
City-St-Zip: ORLANDO, FL 32837 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PUJOL, WILLIAN
Address: 10325 STRATFORD POINT AV WILLIAN
City-St-Zip: ORLANDO, FL 32832 US

Title: S () Change (X) Addition
Name: FLORESTANO, VITO
Address: 10325 STRATFORD POINT AV
City-St-Zip: ORLANDO, FL 32832 US

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: WILLIAN PUJOL

P

09/07/2007

Electronic Signature of Signing Officer or Director

Date