2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000092530

Entity Name: NUMBER 1 BRICK PAVERS, INC

FILED Jun 16, 2008 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

6430 METROWEST BLVD 3406 SOHO STREET

#520 #101

ORLANDO, FL 32835 US ORLANDO, FL 32835 US

Current Mailing Address: New Mailing Address:

6430 METROWEST BLVD 3406 SOHO STREET

APT# 520 APT# 101

ORLANDO, FL 32835 US ORLANDO, FL 32835 US

FEI Number: 20-5202772 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:

NEW LIFE PROFESSIONAL SERVICES

6849 PASTURELANDS PLACE

WINTER GARDEN, FL 34787 US

ARETHA ANDRADE

3406 SOHO STREET

ORLANDO, FL 32835 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: ARETHA ANDRADE 06/16/2008

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SILVA, ITALO EMANUEL N
 Name:
 SILVA, ITALO EMANUEL N

 Address:
 6430 METROWEST BLVD APT# 520
 Address:
 3406 SOHO STREET

 City-St-Zip:
 ORLANDO, FL 32835 US
 City-St-Zip:
 ORLANDO, FL 32835 US

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

 Name:
 SILVA, FABRICIO
 Name:
 ARETHA, ANDRADE

 Address:
 6430 METROWEST BLVD APT# 520
 Address:
 3406 SOHO STREET

 City-St-Zip:
 ORLANDO, FL 32835 US
 City-St-Zip:
 ORLANDO, FL 32835 US

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

 Name:
 SOARES, MANOEL A
 Name:

 Address:
 6430 METROWEST BLVD APT# 520
 Address:

 City-St-Zip:
 ORLANDO, FL 32835 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: ARETHA ANDRADE VP 06/16/2008