

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000136889

FILED
Mar 23, 2009
Secretary of State

Entity Name: LES ENTREPRISES PAV INC.

Current Principal Place of Business:

11794 DONATO DR.
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

10752 DEERWOOD PARK BLVD S
100
JACKSONVILLE, FL 32256 US

Current Mailing Address:

11794 DONATO DR.
JACKSONVILLE, FL 32226 US

New Mailing Address:

P.O. BOX 551660
JACKSONVILLE, FL 32255 US

FEI Number: 20-5790629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTE, PATRICE
6214 LAKE TAHOE DR
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

COTE, PATRICE
3000 E SUNRISE BLVD #15H
FORT LAUDERDALE, FL 33304 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:

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COTE, PATRICE
Address: 11794 DONATO DR.
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: VP () Delete
Name: TOURE, DJIBRIL
Address: 11794 DONATO DR.
City-St-Zip: JACKSONVILLE, FL 32226 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COTE, PATRICE
Address: 3000 E SUNRISE BLVD #15H
City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: VP (X) Change () Addition
Name: TOURE, DJIBRIL
Address: 7015 CYPRESS BRIDGE DR N
City-St-Zip: PONTE VEDRA BEACH, FL 32082 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: PATRICE COTE

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date