2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000075316

Entity Name: EP BRICK PAVERS, INC.

FILED Dec 08, 2008 Secretary of State

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

9645 OLD BAYMEADOWS RD #881 8231 PRINCETON SQUARE BLVD W JACKSONVILLE, FL 32256

1516

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

9645 OLD BAYMEADOWS RD #881 8231 PRINCETON SQUARE BLVD W JACKSONVILLE, FL 32256

1516

JACKSONVILLE, FL 32256

FEI Number: 26-0454460 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:

PARENTE, EMERSON P 9645 OLD BAYMEADOWS RD #881 JACKSONVILLE, FL 32256

PARENTE, EMERSON P 8231 PRINCETON SQUARE BLVD W

JACKSONVILLE, FL 32256 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: EMERSON PARENTE 12/08/2008

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

PARENTE, EMERSON P PARENTE, EMERSON P Name: Name:

9645 OLD BAYMEADOWS RD #881 Address: 8231 PRINCETON SQUARE BLVD W #1516 Address:

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

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

LIMA, WELINGTON Name: Name:

Address: Address: 8231 PRINCETON SQUARE BLVD W #1516

JACKSONVILLE, FL 32256 City-St-Zip: 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.

Ρ SIGNATURE: EMERSON PARENTE 12/08/2008