## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000104570 (2)

RAUL RODRIGUEZ PAVERS, INC.

## FILED Apr 29 1997 8:00am Secretary of State

Principal Place of Business Mailing Address										<b>4</b> 11 <b>11</b> 11 1 <b>11</b> 1
2100 LAUREL ST. #720 2100 LAUREL ST. #720										
SARASOTA FL 34237				SARASOTA FL 34237-7027						
						-		1		
							3. Date Incorporated or Qualified	3a. Da	ite of Last	Heport
2. Principal Place of Business			2a. Mailing Address	2a. Mailing Address			12/26/1996 4. FEI Number			Applied For
21			⊢	26			65-0732238		<b>├</b> ─- <b>┤</b> -	Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					F		Additional
22			27	27			5. Certificate of Status Desired			Required
City & State			City & State			6. Flection Campaign Financing		\$5.0	May Be	
23			28			Trust Fund Contribution			d to Fees	
Ζip		Country		<u> </u>			8. This corporation has liability for	intangible	tax under	r s. 199.032,
24	A Nom	25	29	<u> </u>			Florida Statutes  10. Name and Address of New Registered Agent			
		e and Address of Curre	ит недівтегеа Адепт		1	Name	10. Name and Address of New Re	gistered A	Agent	
	WINDT, JACK									
2389 RINGLING BLVD., STE. A SARASOTA FL 34237				82 Street Add			dress (P.O. Box Number is Not Acceptable)			
	SAMASUIA FI	. 34237		Ē	3					
				В	4	City		FL	85 Zij	p Code
11. Pu	rsuant to the prov	isions of Sections 607.050	02 and 607.1508. Florida Statut	tes the abo		named cor	poration submits this statement for the p	urooco of	changing	n its registered
Off	ice or registered a	agent, or both, in the State	o of Florida. Such change was pations of, Section 607.0505, Fi	authorized :	by I	the corpora	ation's board of directors. I hereby accep	ot the appo	ointment a	as registered
_		min, and accept the cong	galloris of, adollori doz.0303, Fi	Unua Siaiui	105.					
SIGNA	Signature, type	od or printed name of registered ag	ent and title if applicable. (NOI	Flegistered A	\gon	il signature requ	red when reinstaling)	DATE		
12.		OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	ORS IN 12
TITLE	DP		☐ DELETE	1.1 1111.6	Ē				☐ Change	e Addition
NAME		UEZ, RAUL		1.2 NAM	E					
STREET A		UREL ST. #720		1.3 STRE	ET A	ADDRESS				
CITY-ST-		TA FL 34237		1.4 CITY - ST - ZIP		- ZIP				
TITLE	DST	1 PT DOG 1 NO.	□ DECETE	2.1 TITLE					Change	e L Addition
NAME		UEZ, ROSALINDA			2.2 NAME					ļ
STREET A	010100	UREL ST. #720			2.3 STREET ADDRESS					Ì
CITY-ST-	ZIP OATAOL	TA FL 34237	DELETE		2. 4 CITY-ST-ZIP				T	
TITLE				3.1 TITLE					L Change	e 🔲 Addition
NAME	bobcas			3.2 NAM						
STREET A				3.3 STRE						
CITY-ST-	·ZIP		DELETE	3.4 CITY 4.1 TITLE		- 711,			☐ Change	e Addition
NAME			L. precit	4.1 HTE					change	, LI MUUUUII
STREET A	MORESS					ADDRESS				
CITY-ST-				4.4 CITY						
TITLE		······································	DELFTE	5.1 TITLE					☐ Change	e Addition
NAME				5.2 NAM	E				_ '	
STREET A	DDRESS			5.3 STRE		IDDRESS				
CITY-ST-				5.4 CITY						
TITLE			DELETE	6.1 TITLE					Change	e 🔲 Addition
NAME				6.2 NAM	ť	ĺ				
STREET A	DDRESS			6.3 S1RE	ET A	DDRESS				
CITY-ST-				6.4 CITY	- \$1-	- ZIP				
14. d	o hereby certify the	at the information supptie	ed with this filing does not quali	fy for the ex	xem	nption state	d in Section 119.07(3)(i), Florida Statule	s. I further	certify the	at the
l a	m an officer or dir	ector of the corporation of or Black #3 if chaprand	The receiver or trustee empower on an ettachment with an edit	red to exe	ocu	ite this repo	d in Section 119.07(3)(i), Florida Statule It my signature shall have the same lega rt as required by Chapter 607, Florida S	i enect as statutes; ar	n made t nd that my	y name