


FILED
Sep 01, 1999 8:00 am
Secretary of State

09-01-1999 90003 016 ***150.00

09-24-1999 90002 049 ***400.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000013961					
1. Corporation Name EASTWOOD PAVERS, INC.					
Principal Place of Business 3831 FLORIDA BLVD. PALM BEACH GARDENS FL 33410			Mailing Address 3831 FLORIDA BLVD. PALM BEACH GARDENS FL 33410		
DO NOT WRITE IN THIS SPACE					
3. Date Incorporated or Qualified 02/11/1998					
2. Principal Place of Business 21 <u>6361 ROBINSON ST.</u> Suite, Apt. #, etc.			2a. Mailing Address 28 <u>6361 ROBINSON ST.</u> Suite, Apt. #, etc.		
22 City & State <u>JUPITER FL</u>			27 City & State <u>JUPITER FL</u>		
23 Zip <u>33458</u>			29 Zip <u>33458</u>		
25 Country <u>USA</u>			30 Country <u>USA</u>		
4. FEI Number <u>65-0826258</u>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Election Campaign Financing (Trust Fund Contribution) <input type="checkbox"/>			\$5.00 May Be Added to Fees		
8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
9. Name and Address of Current Registered Agent EASTWOOD, JOE 3831 FLORIDA BLVD. PALM BEACH GARDENS FL 33410			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) <u>6361 ROBINSON ST.</u> 83 84 City <u>JUPITER</u> <u>FL</u> 85 Zip Code <u>33458</u>		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <u>JOE EASTWOOD - PRESIDENT</u> DATE <u>7/27/99</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
12. OFFICERS AND DIRECTORS					
TITLE <u>PRESIDENT</u> <input type="checkbox"/> DELETE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE <input type="checkbox"/> DELETE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE <input type="checkbox"/> DELETE					
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CITY-ST-ZIP					
TITLE <input type="checkbox"/> DELETE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE <input type="checkbox"/> DELETE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE <u>PRESIDENT</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
1.2 NAME <u>JOE EASTWOOD</u>					
1.3 STREET ADDRESS <u>6361 ROBINSON ST</u>					
1.4 CITY-ST-ZIP <u>JUPITER FL 33458</u>					
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>JOE EASTWOOD - PRESIDENT</u> DATE <u>7/27/99</u> (561) 714-1169 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

CR2F034 (11/99)