


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 01, 2007 8:00 am**  
**Secretary of State**

03-01-2007 90008 028 \*\*\*150.00

<b>DOCUMENT # P99000002415</b> 1. Entity Name <b>ACTION PAVING &amp; SEAL COATING, INC.</b>					
Principal Place of Business <b>1301 NE 213TH TERR. N. MIAMI, FL 33179</b>			Mailing Address <b>1301 NE 213TH TERR. N. MIAMI, FL 33179</b>		
2. Principal Place of Business - No P.O. Box # <b>1235 NE 204 ST</b>		3. Mailing Address <b>174 NE 96 ST</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>Miami, FL</b>		City & State <b>Miami, FL</b>		4. FEI Number <b>65-0886176</b>	
Zip <b>33179</b>		Country <b>US</b>		Applied For <input type="checkbox"/> Not Applicable	
Zip <b>33179</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>PEREZ, BEHAR &amp; ASSOCIATES, INC. 13435 NW 1ST AVE N. MIAMI, FL 33168</b>				7. Name and Address of New Registered Agent Name <b>PB: A Financial Sres Corp.</b> Street Address (P.O. Box Number is Not Acceptable) <b>174 NE 96 ST</b> City <b>Miami</b> <b>FL</b> Zip <b>33138</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>[Signature]</i></u> / <b>President</b> DATE <b>2/24/07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>GARCIA, SOL A 1301 NE 213TH TERR. N. MIAMI, FL 33179</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>GARCIA, GUSTAVO 1301 NE 213TH TERR. N. MIAMI, FL 33179</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>[Signature]</i></u> <b>Sol Garcia/Prn</b> DATE <b>2/24/07</b> DAYTIME PHONE # <b>305-493-9916</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					