

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000053470

Entity Name: R.S.P. BRICK PAVERS, INC.

FILED
Apr 15, 2006
Secretary of State

Current Principal Place of Business:

300 N HASTINGS STREET
ORLANDO, FL 32835

New Principal Place of Business:

448 LAKE BRIDGE LN
1923
APOPKA, FL 32703 US

Current Mailing Address:

300 N HASTINGS STREET
ORLANDO, FL 32835

New Mailing Address:

448 LAKE BRIDGE LN
1923
APOPKA, FL 32703 US

FEI Number: 59-3586973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE SOUSA PAULA, ROZIVAL
300 N HASTINGS STREET
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

LARSON, CAROLINE
8818 COMMODITY CIR
ORLANDO, FL 32819 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: CAROLINE LARSON

04/15/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DE SOUSA PAULA, ROZIVAL
Address: 300 N HASTINGS STREET
City-St-Zip: ORLANDO, FL 32835

Title: DVP () Delete
Name: SOUSA, GLECIO F
Address: 1601 S HIAWASSEE ROAD, APT 3512
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: SOUSA, GLEIDSON F
Address: 1601 S HIAWASSEE ROAD, APT 3512
City-St-Zip: ORLANDO, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CIFUENTES, ORSIBAL
Address: 448 LAKE BRIDGE LN APT 1923
City-St-Zip: APOPKA, FL 32703 US

Title: VP (X) Change () Addition
Name: RIBEIRO, JAQUES D
Address: 4413 S KIRKMAN RD APT 206
City-St-Zip: ORLANDO, FL 32811 US

Title: ST (X) Change () Addition
Name: DA SILVA, ALENCAR
Address: 4668 CASON COVE DR APT 214
City-St-Zip: ORLANDO, FL 32811 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ORSIBAL CIFUENTES

P

04/15/2006

Electronic Signature of Signing Officer or Director

Date