

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 02, 2000 8:00 am
Secretary of State
08-02-2000 90006 043 ***150.00

DOCUMENT # P99000099939
Entity Name
Blue Diamond Pavers Inc. f

Principal Place of Business
155 NE 90 Street
1 Portal, FL 33138
Mailing Address
7925 NW 12 Street
318
Miami, FL 33126

00076058

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country
3. Mailing Address
7925 NW 12 Street
Suite, Apt. #, etc.
318
City & State
Miami, FL
Zip
33126
Country
Bade

DO NOT WRITE IN THIS SPACE
4. FEI Number
65-0998077
Applied For
Not Applicable
5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Paulo Ramos
455 N.E. 90th Street
El Portal, FL 33138

7. Name and Address of New Registered Agent
Name
Paulo Ramos
Street Address (P.O. Box Number is Not Acceptable)
7925 NW 12 Street Ste 318
City
Miami
FL
Zip Code
33126

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
[Signature]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/25/00
DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.
\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
ST-ZIP	<input type="checkbox"/> Delete PSRD Ramos, Paulo 455 NE 90 Street El Portal, FL 33138	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/00 305 4707504
Date Daytime Phone #

(attachment)
Doc # P99000099939
D0076058

Blue Diamonds Pavers Inc
455 NE 90th Street
El Portal, Fl 33138

July 25th, 2000
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Fl 32302-1500

July 25th, 2000

Dear Sir/Madam:

Please be advised that the above mentioned corporation did not received his first Annual Report for year 2000. I am sending you a copy with the annual fee of \$ 150.00 as I was advised over the phone by you office.

Thank You,

Blue Diamond Pavers Inc