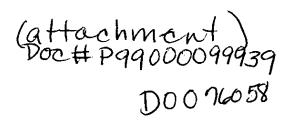
FILED 2000 UNIFORM BUSINESS REPORT (UBR) Aug 02, 2000 8:00 am Secretary of State OCUMENT # P99000099939 Entity Name Jamond Pavers Inc 08-02-2000 90006 043 ***150.00 aignt Place of Business Mailing Address SNE 90 Street Portal, F1 35138 00076958 3. Mailing Address 7925 NW 12 Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 99 8077 Applied For aun Not Applicable \$8.75-Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent amo≤ 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. (NOTÉ: Registered Agent signature required when reinstaling) FILE NOW!!! FEE IS \$150.00 This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Delete TITLE ☐ Change ☐ Addition Yaulo 155 NE 90 STICET HAME STREET ADDRESS 33/38 ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS ST-ZIP CITY-ST-7IP TITLE ☐ Change ☐ Addition ☐ Defete NAME STREET ADDRESS ST-71P CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS ST-ZIP CITY+ST-ZIP ☐ Addition ☐ Defete TITLE Change NAME STREET ADDRESS ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change NAME STREET ADDRESS ST-ZIP CITY-ST-ZIP 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.



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, FI 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