

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V32538

Entity Name: J. A. PAVERS, INC.

FILED  
Apr 23, 2006  
Secretary of State

**Current Principal Place of Business:**

5613 NW 64 TERR  
POMPANO BEACH, FL 33067 US

**New Principal Place of Business:**

P.O. BOX 780854  
ORLANDO, FL 32878 US

**Current Mailing Address:**

5613 NW 64 TERR  
POMPANO BEACH, FL 33067 US

**New Mailing Address:**

P.O. BOX 780854  
ORLANDO, FL 32878 US

FEI Number: 65-0337136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ADAMETZ, JODY  
5613 NW 64 TERR  
POMPANO BEACH, FL 33067 US

**Name and Address of New Registered Agent:**

ADAMETZ, JODY  
1885 LEE RD  
B  
WINTER PARK, FL 32789 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: JODY ADAMETZ

04/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ADAMETZ, JODY,  
Address: 5613 NW 64 TERR  
City-St-Zip: POMPANO BEACH, FL 33067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ADAMETZ, JODY,  
Address: P.O. BOX 780854  
City-St-Zip: ORLANDO, FL 32878

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: JODY ADAMETZ

P

04/23/2006

Electronic Signature of Signing Officer or Director

Date