

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G75176

Entity Name: PRECISION PAVING OF TAMPA, INC.**Current Principal Place of Business:**7825 DEPOT LANE
TAMPA, FL 33637**Current Mailing Address:**7825 DEPOT LANE
TAMPA, FL 33637 US**FEI Number:** 59-2359657**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AZZARELLI, JAY M
607 DANUBE AVENUE
TAMPA, FL 33606 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|-------------------------|
| Title | DP |
| Name | AZZARELLI, JAMES B |
| Address | 902 S. DAKOTA AVE. #3-A |
| City-State-Zip: | TAMPA FL 33606 |

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|-----------------|------------------------|
| Title | VP |
| Name | AZZARELLI, RICHARD A |
| Address | 22419 RED JACKET LANE |
| City-State-Zip: | LAND O' LAKES FL 34639 |

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|-----------------|-------------------------|
| Title | S |
| Name | AZZARELLI, MARY E |
| Address | 902 S. DAKOTA AVE. #3-A |
| City-State-Zip: | TAMPA FL 33606 |

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|-----------------|-------------------|
| Title | VP |
| Name | AZZARELLI, JAY M |
| Address | 607 DANUBE AVENUE |
| City-State-Zip: | TAMPA FL 33606 |

I hereby 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 all other like empowered.

SIGNATURE: JAY AZZARELLI

VP

07/10/2021

Electronic Signature of Signing Officer/Director Detail_____
Date