## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# G25449

FILED Jan 15, 2008 Secretary of State

Entity Name: MIKE'S LAWNMOWER SALES & SERVICE, INC.

urrent P	rincipal Place	e of Business:	New Principal Place	e of Business:
840 SE 4 CALA, F	7TH AVE L 34480			
Current Mailing Address:		New Mailing Address:		
840 SE 4 CALA, F	7TH AVE L 34480			
El Number	: 59-2323669	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
840 SE 4	AWNMOWER 7TH AVE L 34480 US	SALES & SERVICE, INC.		
~~L~, I	2 34400 00	,		
he above			ourpose of changing its registere	ed office or registered agent, or both,
he above	e named entity e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
he above the State	e named entity e of Florida. RE:			ed office or registered agent, or both,  Date
he above the State	e named entity e of Florida. RE: Electror	submits this statement for the բ		
he above the State GNATUI	e named entity e of Florida. RE: Electror	submits this statement for the particles of Registered Agragature of Registered Agragature fund Contribution ( ).	ent	
he above the State IGNATUI	e named entity e of Florida. RE:Electron mpaign Financin S AND DIREC	submits this statement for the particle Signature of Registered Age of Trust Fund Contribution ( ).  TORS:  Delete MICHEL R AVE	ent	Date
he above the State IGNATUI ection Car FFICER ttle: ame: ddress:	e named entity e of Florida.  RE: Electron mpaign Financin  S AND DIREC  P ( KURBANICK, N 3840 SE 47TH OCALA, FL 34	submits this statement for the particle Signature of Registered Age g Trust Fund Contribution ( ).  TORS: ) Delete MICHEL R AVE 480 ) Delete MICHEL J ST.	ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify 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: DONNA L KURBANICK ST 01/15/2008