


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 19, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P06000053257**  
 1. Entity Name  
 AL & ZENS'S HOME MAINTENANCE, INC.



Principal Place of Business      Mailing Address  
 1312 MARKLEY DR                      1312 MARKLEY DR  
 LARGO, FL 33770                      LARGO, FL 33770

**DO NOT WRITE IN THIS SPACE**



02132008      No Chg-P      CR2E034 (11/05)

4. FEI Number <b>20-4710799</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 FRECHETTE, ALAN L  
 1312 MARKLEY DR  
 LARGO, FL 33770

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANCHETTE, ALAN L 1312 MARKLEY DR LARGO, FL 33770
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANCHETTE, ZENAIDE 1312 MARKLEY DR LARGO, FL 33770
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 04/03/08-80069-015 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Alan L. Frchette      ALAN FRECHETTE, PRES.      3/17/08      727-637-1615  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #