## **2008 FOR PROFIT CORPORATION**

## **FILED ANNUAL REPORT** Mar 03, 2008 08:00 A **DOCUMENT # P06000059347** Secretary of State A & B CONSTRUCTION EQUIPMENT, INC. Principal Place of Business Mailing Address 11352 W BAYSHORE DRIVE 11352 W BAYSHORE DRIVE CRYSTAL RIVER, FL 34429 CRYSTAL RIVER, FL 34429 US 02282008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-4764021 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BULLOCK, ALYCE L 11352 W BAYSHORE DRIVE CRYSTAL RIVER, FL 34429 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS P. T TITLE BULLOCK, ALYCE L NAME 11352 W BAYSHORE DRIVE STREET ADDRESS CITY-ST-ZP CRYSTAL RIVER, FL 34429 VP,S TITLE NAME **BULLOCK, BENJAMIN** STREET ADDRESS 11352 W BAYSHORE DRIVE CITY-ST-ZIP CRYSTAL RIVER, FL 34429 U00000346031 03/18/08-80011-021 150.00 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME

12. Thereby 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.

STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME . STREET ADDRESS CITY-ST-7IP

352-257-1740