## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 679557** 

FILED Apr 28, 2008 Secretary of State

Entity Name: ALVIN SOMMERS MASONRY, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	PLELOFT LANE FA, FL 34232			
Current Mailing Address:			New Mailing Address:	
	PLELOFT LANE (A, FL 34232			
El Number	: 59-2005311	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
SOMMER 2664 MAP	S, ERMA PLE LOFT LN			
SARASO1	ΓA, FL 34232	US		
Γhe above	ΓA, FL 34232		urpose of changing its registere	ed office or registered agent, or both,
The above	ΓA, FL 34232 e named entity s e of Florida. RE:	submits this statement for the p		ed office or registered agent, or both,
The above n the Stat	ΓA, FL 34232 e named entity s e of Florida. RE:			ed office or registered agent, or both,  Date
The above n the Stat SIGNATU	FA, FL 34232 e named entity se of Florida.  RE: Electron	submits this statement for the p		
The above n the Stat SIGNATU	FA, FL 34232 e named entity se of Florida.  RE: Electron	submits this statement for the particle Signature of Registered Age of Trust Fund Contribution ( ).	nt	
The above in the State SIGNATU  Election Car  DFFICER  Title:  Jame:  Jame:  Jame:  Jame:  James State	FA, FL 34232 e named entity se of Florida.  RE: Electron mpaign Financing S AND DIREC	submits this statement for the position of Registered Age of Trust Fund Contribution ( ).  TORS: Delete MA, DET LANE	nt	Date
The above n the Stati BIGNATU	FA, FL 34232 e named entity se of Florida.  RE:  Electron mpaign Financing S AND DIREC  STD () SOMMERS, ER 2664 MAPLELO SARASOTA, FL	submits this statement for the prince Signature of Registered Age of Trust Fund Contribution ( ).  TORS: Delete MA, DFT LANE 34232 Delete RNON, CRES DR.	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: ERMA SOMMERS S/T 04/28/2008