

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # G64309

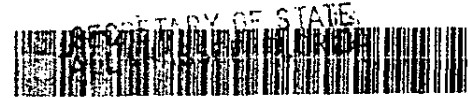
1. Entity Name

BOSCO REALTY, INC.



FILED

09 MAR 27 AM 7:28



Principal Place of Business

% ALBERT BOSCO
1885 AURORA ROAD
MELBOURNE FL 32935

Mailing Address

% ALBERT BOSCO
1885 AURORA ROAD
MELBOURNE FL 32935

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number 59-2343808

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALBERT J BOSCO
1885 AUROA RD
MELBOURNE FL 32935

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and date of signature.

(NOTE: Registered Agent signature required to amend returning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
DPS	BOSCO, ALBERT J	2179 PINEAPPLE AVE	MELBOURNE FL 32935				
T	BOSCO, ALBERT J	2179 PINEAPPLE AVE	MELBOURNE FL 32935				
DV	BOSCO, ALBERT J	2179 PINEAPPLE AVENUE	MELBOURNE FL				

400147724264
03/27/09--01035--004 **150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 owner 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/09 (32) 259-0549

3/30/09