


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 09, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J32941</b>	
1. Entity Name <b>AL'S LAWNMOWER SALES &amp; SERVICE, INC.</b>	

Principal Place of Business <b>C/O RICHARD MASSO 18131 S.W. 98 AVENUE ROAD PALMETTO BAY, FL 33157</b>	Mailing Address <b>C/O RICHARD MASSO 18131 S.W. 98 AVENUE ROAD PALMETTO BAY, FL 33157</b>
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01042006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2727926</b>	Applied For <input type="checkbox"/> 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  <b>MASSO, RICHARD 18131 S.W. 98 AVENUE ROAD PALMETTO BAY, FL 33157</b>
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**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 re-registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 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	<b>DST MASSO, JOYCE 15501 S.W. 88 AVE. PALMETTO BAY, FL 33157</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P MASSO, RICHARD 18131 S.W. 98 AVE. RD. MIAMI, FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V MASSO, ALPHONSE 15501 SW 88 AVENUE PALMETTO BAY, FL 33157</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

01/10/06 80012-023 150.00

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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: *Richard P. Masso* 01-04-06 305-238-6332  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

pd-01-01-06  
Jett 25627