

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # J32941

1. Entity Name
AL'S LAWNMOWER SALES & SERVICE, INC.



Principal Place of Business
**C/O RICHARD MASSO
18131 S.W. 98 AVENUE ROAD
PALMETTO BAY, FL 33157**

Mailing Address
**C/O RICHARD MASSO
18131 S.W. 98 AVENUE ROAD
PALMETTO BAY, FL 33157**



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2727926	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MASSO, RICHARD
18131 S.W. 98 AVENUE ROAD
PALMETTO BAY, FL 33157**

**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

Signature, typed or printed name of registered agent and title if applicable.

(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	DST MASSO, JOYCE 15501 S.W. 88 AVE. PALMETTO BAY, FL 33157
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MASSO, RICHARD 18131 S.W. 98 AVE. RD. MIAMI, FL
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MASSO, ALPHONSE 15501 SW 88 AVENUE PALMETTO BAY, FL 33157
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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02/08/08-80025-007 150.00

**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:

Joyce R. Masso Sec. Treas. Joyce R. Masso 1-26-08 305-238-6332

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #