

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036677

FILED
Aug 21, 2006
Secretary of State

Entity Name: MASCARO & SON TRUCKING, LLC

Current Principal Place of Business:

3509 HILLGROVE ROAD
VALRICO, FL 33549

New Principal Place of Business:

Current Mailing Address:

3509 HILLGROVE ROAD
VALRICO, FL 33549

New Mailing Address:

FEI Number: 20-2702670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RIVELLINI, PETER A
911 CHESTNUT STREET
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MASCARO III, RALPH M
Address: 3509 HILLGROVE RD
City-St-Zip: VALRICO, FL 33594 US

Title: MGRM () Change (X) Addition
Name: MASCARO, DAVI D
Address: 3509 HILLGROVE RD
City-St-Zip: VALRICO, FL 33594 US

Title: MGRM () Change (X) Addition
Name: MASCARO IV, RALPH M
Address: 3509 HILLGROVE RD
City-St-Zip: VALRICO, FL 33594 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RALPH M. MASCARO III

MGR

08/21/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date