## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000102241

City-St-Zip:

DORAL, FL 33166

Entity Name: A & B AND SON'S EQUIPMENT COMPANY

FILED Jul 09, 2007 Secretary of State

Littly Nai	ile. A & D AN	ID 30113 EQUIFIVIENT COVIE	-AIVI				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
6201 NW 1 DORAL, F	102ND AVE L 33172						
Current Mailing Address:			New Maili	New Mailing Address:			
7845 NW 5 DORAL, F							
FEI Number: 36-4578781 FEI Number Applied For (		FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desir	ed (X)	
Name and	Address of (	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
BONVECC 13340 SW MIAMI, FL	CHIO, ADOLFO 1ST STREET 33184 US	•					
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent	t, or both,	
SIGNATUR	RE:						
	Electro	nic Signature of Registered Ag	ent	Date			
		03(2)(b), F.S., the corporation did n g Trust Fund Contribution (  ).	ot receive the prior notic	e.			
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGES	S TO OFFICERS AND D	IRECTORS:	
Title: Name: Address: City-St-Zip:	P ( BONVECCHIO 13340 SW 1ST MIAMI, FL 331	STREET	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	VP ( BONVEECHIN, 7845 NW 5TH DORAL, FL 33	ST	Title: Name: Address: City-St-Zip:	VP ( BONVECCHIO 7845 NW 5TH DORAL, FL 3	ST		
Title: Name: Address:	S ( BONVEECHIN, 7845 NW 57TH		Title: Name: Address:	S ( BONVECCHIC 7845 NW 57T	,		

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.

City-St-Zip:

DORAL, FL 33166

SIGNATURE: BONVECCHIO ADOLFO P 07/09/2007