## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V22884

1. Entity Name

ALL CONSTRUCTION EQUIPMENT SALES, INC.



Principal Place of Business

5026 NW 120 AVE

CORAL SPRINGS, FL 33076 US

Mailing Address

5026 NW 120 AVE

CORAL SPRINGS, FL 33076 US

## **FILED** Mar 28, 2008 08:00 Al **Secretary of State**



03072008

Applied For 4. FEI Number 65-0328857 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

BUSCH, JOHN E. 5026 NW 120 AVE CORAL SPRINGS, FL 33076 DO NOT WRITE IN THIS SPACE

No Chg-P

	•	कि संस्कृति स्वरूपिया है। स्तिमार्जी के स्वरूपिया के स्वरूपिया है।	
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 in		(NOTE: Registered Agent signature required when reinstating)	DATE
FIL After Ma		Campaign Financing \$5.00 May Be d Contribution.	
10.	OFFICERS AND DIRECTORS	the state of the first of the second and	Proposition of the Control of the Co
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. BUSCH, JOHN E 5026 NW 120 AVE CORAL SPRINGS, FL 33076	The court of the first of the light of the l	, 000000873537 , 94710708-80083-005-150.004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BUSCH, CARMEN R. 5026 NW 120 AVE CORAL SPRINGS, FL 33076		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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 accurate and other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP