

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000026586

Entity Name: LANZO TRENCHLESS TECHNOLOGIES, INC.-SOUTH**Current Principal Place of Business:**125 SE 5TH COURT
DEERFIELD BEACH, FL 33441**Current Mailing Address:**125 SE 5TH COURT
DEERFIELD BEACH, FL 33441 US**FEI Number:** 65-0414559**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**D'ALESSANDRO, GIUSEPPE
125 SE 5TH COURT
DEERFIELD BEACH, FL 33441 US*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**Officer/Director Detail :**

Title PRESIDENT
Name D'ALESSANDRO, GIUSEPPE
Address 303 DEER CREEK RUN
City-State-Zip: DEERFIELD BEACH FL 33442

Title AS
Name TILLI, MATTHEW P
Address 660 UNION AVE
City-State-Zip: CRESCENT CITY FL 32112

Title AS
Name PAWLOWSKI, KEVIN P
Address 2734 NE 27TH COURT
City-State-Zip: LIGHTHOUSE PT. FL 33064

Title ASST. SECRETARY
Name TINGBERG, FRED
Address 2005 SW AMARILLO LANE
City-State-Zip: PALM CITY FL 34990

Title VP
Name D'ALESSANDRO, ANTONIO
Address 21788 REFLECTIONLANE
City-State-Zip: BOCA RATON FL

Title SECRETARY
Name TORRES, ROSEMARIA
Address 37230 WILLOW LANE
City-State-Zip: CLINTON TWP MI 48036

Title VP
Name D'ALESSANDRO, QUIRINO JR.
Address 4611 NORTH FEDERAL HWY
 520
City-State-Zip: POMPANO BEACH FL 33064

Title ASST. SECRETARY
Name BEATY, ROBERT
Address 1864 GOLFOVIEW BLVD
City-State-Zip: SOUTH DAYTONA FL 32119

I hereby 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 all other like empowered.

SIGNATURE: KEVIN PAWLOWSKI

AS

01/11/2018

Electronic Signature of Signing Officer/Director Detail_____
Date