

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2008 08:00 AM
Secretary of State

DOCUMENT # 469773

1. Entity Name

ROMO PROPERTIES, INC.



Principal Place of Business

4711-57 N.W. 24TH CT
LAUDERDALE LAKES FL 33313
US

Mailing Address

13 JOHANNA DR.
HOLLAND PA 18966



1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

4. FEI Number

59-1619284

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COSTANZO, SARINO R.
SUITE 1001
100 BISCAYNE BLVD., NORTH
MIAMI FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 state if applicable.

(NOTE: Registered Agent signature required when rechartering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME PD
STREET ADDRESS FERGUSON, JOHN
CITY - ST - ZIP 13 JOHANNA DRIVE
HOLLAND PA 18966

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP
000000816523
02/14/08-80053-017 150.00

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: John Ferguson Feb 2/5/08 2679805559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #