## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000096377

Entity Name: LOMONICO CONTRACTING INC

FILED Apr 13, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2301 US 2 SEBRING,	7 SOUTH FL 33870				
Current Mailing Address:			New Mailing Address:		
2301 US 2 SEBRING,	7 SOUTH FL 33870				
FEI Number	: 20-0150896	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	f New Registered Agent:	
4416 MED	DEBORAH J INA WAY FL 33875	US			
The above in the State	named entity of Florida.	submits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electron	nic Signature of Registered Ager	nt	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CFO ( HEARIN, DEBC 4416 MEDINA SEBRING, FL	WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CEO ( LOMONICO, AI 4416 MEDINA SEBRING, FL	WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( HEARIN, DEBO 4416 MEDINA SEBRING, FL	WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ( HEARIN, DEBO 4416 MEDINA SEBRING, FL	WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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 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.

SIGNATURE: DEBORAH J HEARIN S 04/13/2007