

Page 1 of 2
10/13/06 0105D 023 \$150.00

09-06-2007 90009 001 ***150.00
P03000154969

FILED

07 OCT 11 AM 9:11

CLERK OF STATE
TALLAHASSEE, FLORIDA

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P03000154969
1. Entity Name PASSERO CONTRACTING INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5606 PALMETTO DRIVE Suite, Apt. #, etc.	3. Mailing Address 5606 PALMETTO DRIVE Suite, Apt. #, etc.
City & State FORT PIERCE, FL	City & State FORT PIERCE, FL
Zip 34982-7448	Country

REINSTATEMENT 06-07

DO NOT WRITE IN THIS SPACE

4. FEI Number 33-1078199	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

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

5606 Palmetto Drive
City Ft. Pierce **FL** **Zip Code** 34982-7448

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 Rocco N. Passero

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE**

January 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PASSERO, ROCCO V 5606 PALMETTO DRIVE FORT PIERCE, FL 34982
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Rocco N. Passero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/31/07 772-595-0337

Date

Daytime Phone #

As per telephone conversation with

2/10/2

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Passero Contracting
5606 Palmetto Drive
Fort Pierce, FL 34982

October 3, 2007

Florida Department of State
Division of Corporations

Re: Reinstatement

Dear Sir or Madame:

We did not receive the 2006 notice and we request a waiver of reinstatement fee. Use the 2006, 2007 monies for the reinstatement as we did not receive the notices.

Sincerely,

A handwritten signature in cursive script, appearing to read "Rocco V. Passero".

Passero Contracting, Inc.
Rocco V. Passero