


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 29, 2007 08:00 AM**  
**Secretary of State**


**DOCUMENT # P93000054441**

1. Entity Name  
**DIPOMPEO CONSTRUCTION CORPORATION**



Principal Place of Business 2301 NW 33RD COURT 102 POMPANO BEACH, FL 33069 US	Mailing Address 2301 NW 33RD COURT 102 POMPANO BEACH, FL 33069 US
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**DO NOT WRITE IN THIS SPACE**



03192007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0426294	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

DIPOMPEO, JOHN JR  
 2301 NW 33RD COURT  
 102  
 POMPANO BEACH,, FL 33069

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

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	000000683339 04/05/07-80040-023 150.00
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10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DIPOMPEO, JOHN JR
STREET ADDRESS	2301 NW 33RD COURT 102
CITY-ST-ZIP	POMPANO BEACH, FL 33069
TITLE	D
NAME	DIPOMPEO, JOHN SR
STREET ADDRESS	2301 NW 33RD COURT #102
CITY-ST-ZIP	POMPANO BEACH, FL 33069
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 address, with all other lines empowered.

**SIGNATURE:** John DiPompeo 3/26/07 954-917-5252  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #