

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 10, 2008 08:00 AM
Secretary of State

DOCUMENT # S40261

1. Entity Name
ROMEO & SONS CONSTRUCTION, INC.



Principal Place of Business
8705 SW 60TH CIRCLE
OCALA, FL 34476 US

Mailing Address
PO-BOX 772528
OCALA, FL 34477 US



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3060236

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROMEO, MICHAEL
8705 SW 60TH CIRCLE
OCALA, FL 34476

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PO
NAME	ROMEO, MICHAEL
STREET ADDRESS	8705 SW 60TH CIRCLE
CITY-ST-ZIP	OCALA, FL 34476
TITLE	TS
NAME	DAMIAN, TORINO
STREET ADDRESS	2780 NE 64TH LANE
CITY-ST-ZIP	OCALA, FL 34478
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/10/08-80039-003 150.00

**DO NOT WRITE
IN THIS SPACE**

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 like empowered.

SIGNATURE:

Michael Romeo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-08-08 352622 8747
Date Daytime Phone #