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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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May 09 1997 8:00am
Secretary of State

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DOCUMENT # F77265 1. Corporation Name DIANA J.W. NAPOLI, R.P.T., P.A. Principal Place of Business 10758 NASHVILLE DR. C/O DOMINICK J. NAPOLI, JR. (9) Mailing Address 10758 NASHVILLE DR. C/O DOMINICK J. NAPOLI, JR.								
COOPER CITY US	/ FL 33026-4900	COOPER CITY F US	l 33026-4900		Date Incorporated or Qualified 04/21/1982	1	te of Last F	Report
2. Principal F	Place of Business	2a. Mailing Add	ress	······································	4. FEI Number	0010		pplied For
1		26			59-2188265			ot Applicable
Suite, Apt.	. #, €IO.	Suite, Apt. #	r, eic.		5. Certificate of Status Desired			Additional equired
Cily & Sta	ile	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00	May Be to Fees
Zip 4	Country 25	Zip Zip	30	Country	8. This corporation has liability for		tax under s	•——
<u></u>	9. Name and Address of (10. Name and Address of New A			
	POLI, DOMINICK J., JR.			81 Name				
10758 NASHVILLE DR			82 Street A		ress (P.O. Box Number is Not Accepta	ble)	· · · · · · · · · · · · · · · · · · ·	a
CO	OPER CITY FL 33026			83	 		··········	
				84 City			 85 Zip	Code
11. Pursuant office or agent 1a	to the provisions of Sections 6 reg stered agent or both, in the ani familiar with, and accept the	07.0502 and 607.1508, Flor e State of Florida. Such cha o obligations of, Section 607	ida Statutes, thi nge was author 7.0505, Florida S		poration submits this statement for the ation's board of directors. I hereby acce	purpose of opt the appo	changing i ointment as	its registered registered
SIGNATURE	Signature types a probabilisme of regal	lored agent and title if applicable. RS AND DIRECTORS	(NOTE: Regis	e above-named corrized by the corpora Statutes. stered Agent agnature requi		purpose of opt the appo	DIRECTO	RS IN 12
SIGNATURE 12. IIIIE	Signature types a printed new of regis OFFICEI	lored agent and title if applicable. RS AND DIRECTORS	(NOTE Regis	e above-named corrized by the corpora Statutes. stered Agent signature requi	rred when reinstating)	purpose of opt the appo		RS IN 12
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11. Pursuant office or agent 1 a SIGNATURE 12. TILE NAME STREET ADDRESS CITY-SL-7IP TILE NAME STREET ADDRESS CITY-SL-7IP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICE PD NAPOLI, DIANA J W 10758 NASHVILLE DR COOPER CITY FL	lond agen and title if applicable RS AND DIRECTORS	(NOTE Registration 1	e above-named corrized by the corpora Statutes. stered Agent signature requilable. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	rred when reinstating)	purpose of opt the appo	DIRECTOI Change	RS IN 12 Addition
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14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and called on this annual report or supplemental annual 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 roceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DIAMA SUN Apoli Provident DIAMA J.W. NAPOLI 5/1/97 (954)4381566