

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N24115 (0)

1. Corporation Name

THE FOUNDATION FOR STUDIES AND RESEARCH, INC.



Principal Place of Business

%STEFANO I.D. DIMAURO, M.D.  
16910 NE 8TH COURT  
N. MIAMI BEACH FL 33162

Mailing Address

%STEFANO I.D. DIMAURO, M.D.  
16910 NE 8TH COURT  
N. MIAMI BEACH FL 33162

3. Date Incorporated or Qualified  
12/29/1987

3a. Date of Last Report  
02/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number  
65-0051963

Applied For  
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIMAURO, STEFANO I.D.  
16910 NE 8TH COURT  
N. MIAMI BEACH FL 33162

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
DIMAURO, STEFANO I.D.  
16910 NE 8TH COURT  
N. MIAMI BEACH FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
TUCCIO, MARIA  
VALE S PANAGIA 136 SCALA P  
SIRACUSA IT ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
RENZI, RENATO  
230 NE 174 ST  
N MIAMI BEACH FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEFANO DIMAURO

Date

Daytime Phone: #

CR2E037 (12/95)