

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

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 91016 003 ***150.00

DOCUMENT # *P00000102127*

1. Entity Name
Network Professionals International, Inc.



DO NOT WRITE IN THIS SPACE

10040030

2. Principal Place of Business

795 CR 1

Suite, Apt. #, etc.

Ste 23

City & State

Palm Harbor, FL

Zip

34683

Country

Pinellas

3. Mailing Address

Suite, Apt. #, etc.

Same

City & State

City & State

City & State

City & State

City & State

City & State

City & State

4. FEI Number

41-1710175

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name *DANIEL Doody*

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

795 CR 1, Ste 23

City

Palm Harbor

FL

Zip Code *34683*

**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

Daniel E. Doody

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

(NOTE: Registered Agent signature required when re-registering)

DATE

January 1 - May 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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*PRESIDENT
Dan Doody
795 CR 1, Ste 23
Palm Harbor, FL 34683*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*Sec. Treas.
Glenn Palmer
795 CR 1, Ste 23
Palm Harbor, FL 34683*

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 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:

Daniel E. Doody

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL E. Doody

3/21/03

727-946-0772

Date

Daytime Phone #

CR2E034B (12/02)