2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000053068

1. Entity Name NAPASA, INC.



FILED
May 04, 2007 08:00 A
Secretary of State

Principal Place of Business

P.O. BOX 21349

WEST PALM BEACH, FL 33416-1349

Mailing Address

P.O. BOX 21349

WEST PALM BEACH, FL 33416-1349



				05022007	No Chg-P CR2	E034 (11/05)	
DO NOT WRITE IN THIS SPA			GE Variable (4. FEI Number 65-113		Applied For Not Applicable	
taria			y b	5. Certificate	of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current Reg	Istered Agent					
ROMANO, NANCY L P.O. BOX 21349 WEST PALM BEACH, FL 33416-1349			, 42 m s	.00	NOT WRIT		
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				S. X. 1. 1. 3. 3. 3.	e a Branda Art	Reference Commence	
	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	ed office or reg	gistered agent, or bo	th, in the State of Florida. 1 a	ım familiar with, and accept	
SIGNATURE Signature, typed or printed name of registated agent and title if applicable. (NOTE: Registered			d Agent agnature required when reinstating)		DAT	DATE	
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FILE NOWILL FEE IS \$550.00- Due by September 14, 2007 9. Election Campaign Finar Trust Fund Contribution.			ncing	\$5.00 May Be Added to Fees	U000007624 05/29/07-8000	46 4-022 150.00	
10.	OFFICERS AND DIR	ECTORS	,	غ د			
TITLE NAME	D ROMANO, NANCY		Salah Kali		the state of the state of		
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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 like empowered.

SIGNATURE: Jace & Limand

NAME STREET ADDRESS CITY-ST-ZIP

IND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/07

561-513-6700

Daytime Phone #