2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000070228

1. Entity Name
DIANA A. PROMUTO, LCSW, P.A.

Principal Place of Business	Mailing Address
2870 NE 8TH STREET	2870 NE 8TH STREET
POMPANO BEACH, FL 33062	POMPANO BEACH, FL 33062

DO NOT WRITE IN THIS SPACE

04012006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-1121901	Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PROMUTO, DIANA A
2870 NE 8TH STREET
POMPANO BEACH, FL 33062

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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 reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	PST	
NAME	PROMUTO, DIANA A	
STREET ADDRESS	2870 NE 8TH ST	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

05/18/06-80046-002 150.00

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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: X _____ Diana A. Promuto X _____ 954-771-5040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #