## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 1. Corporation Name

P92000012959 (2)

CPN/PPO, INC.



Principal Place o	if Business	Mailing Address							
2200 CORPORATE BLVD NW SUITE 314 BOCA RATON FL 33431		2200 CORPORATE BLVD NW SUITE 314 BOCA RATON FL 33431							
					3. Date Incorporated or Qualified 12/18/1992 3a. Date of Last Report 10/16/1995				
a Division Divis	of Dunionor	2a. Mailing Address				4. FEI Number			Applied For
2. Principal Plac	de OL Bosiness	26			65-0378202 Not Applicable				
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
22		27			5 Shart on Companies Figureins			.00 May Be	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	Added to Fees			
Zp	Country	Zip	Zip Count  29 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☑ No			
24	25   29   30   9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
	g. Hame and Accioss of Carre			81	Name				ļ
FABRIZI, MICHAEL				B2	Street Addr	ot Address (P.O. Box Number is Not Acceptable)			
2200 CO SUITE 3	PRP. BLVD. NW		Į. Į	B3					
BOCA R	ATON FL 33431			84	City		FL	85	Zip Code
11. Pursuant to or registere familiar with	o the provisions of Sections 607.050 ed agent, or both, in the State of Flo h, and accept the obligations of, Se	02 and 607 1508, Florida Stati rida. Sugh change was author Jion 677 0505, Florida Statut	utes, the abovized by the coes.	re-n orpx	named corpor oration's boar	ration submits this statement for the pured of directors. Thereby accept the app	rpose of chai jointment as	nging i registe /4/	ts registered office red agent. I am
SIGNATURE _	/ Copplant	1 VIIII	Michae	し	rybkic			eit	<u> </u>
	Signature, typed of printer time of registered age	ND DIRECTORS	13.	ngen	it signature respire	d when reinstaling)  ADDITIONS/CHANGES TO OF F	ICERS AND	DIREC	CTORS IN 12
12.		ND DIRECTORS DELETE	1.130	l) E		ASEATIONS OF A COLOR		Char	
105LF	FABRIZI, MICHAEL J			1.2 NAME					
NAME		W CHITE 914			ADDUTCE				
STREET ADDRESS	2200 CORPORATE BLVD N	W SUITE SIA							
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TITLE		[] betele	2.2 NAME				_		
NAME									
STREET ADDRESS			<b>I</b> .		ADDRESS				i
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NAME			3 2 NA						
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NAME			4.2 N/						
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NAME			5 2 N		ļ				
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NAME			62N	AME					
STHEET ADDRESS			638	THEE	T ADORESS				
CITY-ST-ZIP			6 4 C	ITY-	ST - ZIP	for the execution stated in Section 11	0.07/20/04 50	orida C	tatutos I furtiror
			امسمام المالات	-1-	an and smaller	es una avamatica etatad in SACTION 11	SHULL SHOULD FROM	MR Lat a	non neco. Little Little

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 cath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

WICHAEL FABRICI CEO 4/19/84