

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra H. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000037996 (2)**

1. Corporation Name

DIANE M. TRAINOR, P.A.

Principal Place of Business

**DADELAND TOWERS NORTH, SUITE 700
9200 S. DADELAND BLVD.
MIAMI FL 33156**

Mailing Address

**DADELAND TOWERS NORTH, SUITE 700
9200 S. DADELAND BLVD.
MIAMI FL 33156**



2. Principal Place of Business

21 State: **Appl. No.**

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 State: **Appl. No.**

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

3. Date Incorporated or Qualified

05/12/1995

3a. Date of Last Report

4. FET Number

65-0585190

Applied For
Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

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

10. Name and Address of New Registered Agent

81 Name
DIANE M. TRAINOR

82 Street Address (P.O. Box Number is Not Acceptable)
9200 South Dadeland Blvd.

83 Suite 700

84 City
Miami,

85 Zip Code
FL 33156

11. Pursuant to the provisions of Sections 607.01(2) and 607.15(4), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent to the State of Florida. Said 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 607.01(2), Florida Statutes.

SIGNATURE

[Signature]

DATE: **11/31/96**

12. OFFICERS AND DIRECTORS

12a. Name ☐ DE FE

NAME
**PD
TRAINOR, DIANE M
9200 S. DADELAND BLVD., SUITE 700
MIAMI FL 33156**

12b. Title ☐ DE FE

12c. Street Address ☐ DE FE

12d. City & State ☐ DE FE

12e. Zip ☐ DE FE

12f. Country ☐ DE FE

12g. Telephone ☐ DE FE

12h. Fax ☐ DE FE

12i. E-mail ☐ DE FE

12j. Other ☐ DE FE

12k. Other ☐ DE FE

12l. Other ☐ DE FE

12m. Other ☐ DE FE

12n. Other ☐ DE FE

12o. Other ☐ DE FE

12p. Other ☐ DE FE

12q. Other ☐ DE FE

12r. Other ☐ DE FE

12s. Other ☐ DE FE

12t. Other ☐ DE FE

12u. Other ☐ DE FE

12v. Other ☐ DE FE

12w. Other ☐ DE FE

12x. Other ☐ DE FE

12y. Other ☐ DE FE

12z. Other ☐ DE FE

12aa. Other ☐ DE FE

12ab. Other ☐ DE FE

12ac. Other ☐ DE FE

12ad. Other ☐ DE FE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. Name ☐ Change ☐ Addition

13b. Title ☐ Change ☐ Addition

13c. Street Address ☐ Change ☐ Addition

13d. City & State ☐ Change ☐ Addition

13e. Zip ☐ Change ☐ Addition

13f. Country ☐ Change ☐ Addition

13g. Telephone ☐ Change ☐ Addition

13h. Fax ☐ Change ☐ Addition

13i. E-mail ☐ Change ☐ Addition

13j. Other ☐ Change ☐ Addition

13k. Other ☐ Change ☐ Addition

13l. Other ☐ Change ☐ Addition

13m. Other ☐ Change ☐ Addition

13n. Other ☐ Change ☐ Addition

13o. Other ☐ Change ☐ Addition

13p. Other ☐ Change ☐ Addition

13q. Other ☐ Change ☐ Addition

13r. Other ☐ Change ☐ Addition

13s. Other ☐ Change ☐ Addition

13t. Other ☐ Change ☐ Addition

13u. Other ☐ Change ☐ Addition

13v. Other ☐ Change ☐ Addition

13w. Other ☐ Change ☐ Addition

13x. Other ☐ Change ☐ Addition

13y. Other ☐ Change ☐ Addition

13z. Other ☐ Change ☐ Addition

13aa. Other ☐ Change ☐ Addition

13ab. Other ☐ Change ☐ Addition

13ac. Other ☐ Change ☐ Addition

13ad. Other ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is true, correct, 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. I am an officer or director of the corporation or a person authorized by the corporation's board of directors to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, once available, in the filing office.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]
11/31/96 305620-600

CR2E034 (12/95)