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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P96000037690 (0)

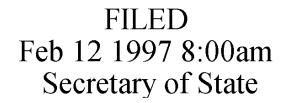
DPM TELECOMMUNICATIONS, INC.

Principal Place of Business

2203 NORTHEAST 122TH STREET

Mailing Address

2203 NORTHEAST 122 STREET





22	NORTH MIAMI FL 33181		NORTH MIAMI FL 33181-	NORTH MIAMI FL 33181-2910						
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Sale, Apl II. dec   \$8.75 And III. dec   \$9.75 And	2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address					Applied For	
Suite, Agr. #, etc.  20	1566 N	E 191 ST							Not Applicable	
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Zip	·			I FL		, , ,				
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AND ALLERA AVENUE CORAL GABLES FL 33134  2 Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits its statement for the purpose of changing list region (click or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits its statement for the purpose of changing list region (click or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits its statement for the purpose of changing list region (click or registered agent and the florida Statutes, the above-named corporation submits its statement for the purpose of changing list register agent (am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation statement for the purpose of paraginal transfer with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation statement for the purpose of changing statement of the purpose of changing statement of the purpose of change indicates. In the purpose of paraginal statement of the purpose of change indicates in the purpose of paraginal statement of the purpose of change indicates. In the purpose of paraginal statement of the purpose of change indicates in the purpose of paraginal statement of the purpose of paraginal statement of the purpose of change indicates. In the purpose of paraginal statement of the purpose of		9. Name and Address of Cu	urrent Registered Agent			10. Name and Address of New Re	gistered A	.gent		
11. Pursuant to tree previousnes of Sections 607.05.02 and 607.15.08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registred agent, or both, in the State of Florida. Such change was authorized byte corporation submits this statement for the purpose of changing its registred agent of the with, and accept the obligations of, Section 607.05.05, Florida Change was authorized byte occupation in board of directors. I hereby accept the appointment as registred agent agent of the with, and accept the obligations of, Section 607.05.05, Florida Change was authorized byte occupation in board of directors. I hereby accept the appointment as registred agent agent of the with a state of florida. Such change was authorized byte occupation in board of directors. I hereby accept the appointment as registred agent agent of the floridation. Other 12 to 11 to 11 to 12 to 12 to 12 to 12 to 12 to 12 to 13 to 14 to 12 to 13 to 14 t	343	ALMERIA AVENUE		82	Street Add 1566	ONALD P. MANFREDONIA tress (P.O. Box Number is Not Acceptal NE 191 ST. #222	ole)			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registroid agent 1 am from fair with and accept the obligations of, Section 607.0506, Florida Statutes, and the purpose of changing its registroid agent and make the purpose of provisions admits the purpose of provisions agent and make the purpose of provisions agent and the purpose of provisions agent and accept the obligations of Section 607.0506, Florida Statutes agent and accept the obligations of Section 607.0506, Florida Statutes and the purpose of provisions agent and accept the obligations of Section 607.0506, Florida Statutes and the purpose of provisions agent and accept the appointment as regist agent agents. It hereby accept the appointment as regist agent agents and directors. I hereby accept the appointment as regist agent agents and directors. I hereby accept the appointment as regist agents agents and directors. I hereby accept the appointment as regist agents. I hereby accept the appointment are registed agents are appointed to the appointment are registed agents and accept the appointment ar				B4		OURI MANAGE POLICE	Fi	85 Zip (	Code	
DONALD P. MANFREDONIA (PRESIDENT)   Signature byte of a princip degree agent and set all applicable. (NOTE: Included Agent signature treatment projected agent agent and set all applicable. (NOTE: Included Agent signature treatment projected agent agent and set all applicable. (NOTE: Included Agent signature treatment projected agent agent and set all applicable. (NOTE: Included Agent signature recursed agent agent agent and set all applicable. (NOTE: Included Agent signature recursed agent a	44 Puremont I	to the provision of Socions 603	7.0502 and 607.1509. Florida Statu	itor, the above	NOT	coration submits this statement for the		changing it	c registered	
DELETE   TITILE   DELETE   T	SIGNATURE	DONALD P. MAN Signature typed or pinted name of register	FREDONIA (PRESIDEN and agent and title if applicable (NC	T) OTE: Registered A	bertle !	ired with Yeinstay of	J/3	1/97	<u> </u>	
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CITY-SI-ZIP 64 CITY-SI-ZIP										

14. I do 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 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; 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:** 

DONALD P. MANFREDONIA (PRESIDENT) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR