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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996DOCUMENT #

1. Corporation Name

M17566

(4)

FILED Apr 24 1996 8:00 am Secretary of State

Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State City & State Trust Fund Contribution Zip Country Zip Country Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Status Desired Fee Required Fee Required Fee Required Status Desired Fee Required Fee Required Fee Required Status Desired Fee Required Status Desired Fee Required Status Desired Fee Required Fee Req	THE N	IANNY NETWORK, INC.			# (B.3) (B.1) 180 180 180 180 180 180 180 180 180 180 180 180 180 180 180 180	4.1.1.1 17.1.1 77.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1.1 17.1	
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2. Principe Pales of Business 2a. Maling Address 2a 59 2568953 Not Applicable	20145 N.E. 25TH AVE. 20145 N.E. 25TH AVE.				Date Incorporated or Qualified 3:	a. Date of Last Report	
Substitution					07/02/1985	05/01/1995	
Select Application Selection Selecti	· ·	ace of Business	- ·		1	Applied For	
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28	22		27		-	Fee Required	
2p		9	⊢¬ '		, ,		
25 28 30 10. Name and Address of Current Registered Agent 10. Name and Address of Name Registered Agent 10. Name Regis		Country		Country	Hust Forld Contribution	Added to Fees	
MICHAEL FERTIG 801 BRICKELL AVE., 24TH FLOOR MIAMIF L 33131 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florads Statutes. The above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's beard of directors. Hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505, Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered agent. I am millier with, and accept the obligations of, Section 607,0505, Florida Statutes. The above named corporation's beard of directors. Hereby accept the appointment as registered agent. I am millier with a director and registered agent. I am millier with	24	25	<u> </u>	⊢ ¬ ′		~	
MICHAEL FERTIG 801 BRICKELL AVE., 24TH FLOOR MIAMI FL 33131 82 Street Address (P.O.Box furnities in Not Acceptable) (Local 11. Pursuant to the provisions of Sections 607.0506 and 607.1508, Florida Statutes, the above-named corporation submins this statement for the purpose of changing its registered agent, or both, in the State of Florida, Statutes, the above-named corporation submins this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Statutes, the above-named corporation submins this statement for the purpose of changing its registered agent, a larn of accept the displation of, Sociol not 70.7506, Plands Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. In this part of print drawer of regulations spirit and size agricults 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. In the State Address State Advised State St		9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Regis	stered Agent	
801 BRICKEL AVE., 24TH FLOOR MIAMI FL 33131 803				81 Name	Michael Fly		
NAME		ANOUAE PERMO			dyess (P.O. Box Number is Not Acceptable)	47.	
City FL St City City FL St City City FL St City					SE SHI AVE 28	1001	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fiords Statutes and the provisions of Sections 607,0502 and 607,1508, Fiords Statutes are above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's brand of directors. I horeby accept the appointment as registered agent, and accept the obligations of, Section 697,0505, Florids Statutes. SIGNATURE	MIAMI F	FL 33131			AMI FLOATDA		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Fixerial Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fixerials. Such change was submits this statement for the purpose of changing its registered office or registered agent, in the State of Fixerials. Since the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Disputor, typed or protect name of registered agent and the agriculture. NOTE Registered Agent signature required when removaling DATE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.						85 Zip Code	
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SIGNATURE Symbols speed or period rame of registered agent and sheet Registable Registered Agent Septiative regis after nembalary) DATE	or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am						
NOTE Repationed Agent degree above and their language NOTE Repationed Agent degree above recovered when measuring DATE		th, and accept the obligations of, Si	ection 607.0505, Florida Statutes				
12.		Slunature, typed or printed name of registered as	ger I and title if applicable (NO	TE: Redistered Agent signature reg	ured when reinstalion)	DATE	
NAME FERTIG, RONI K. 20145 N.E. 25 AVE. 3 STREET ADDRESS 14 CHY-ST-2IP			··· · · · · · · · · · · · · · · · · ·		* · · · · · · · · · · · · · · · · · · ·		
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14. I do hereby cartify that the information supplied with this filing is val intarily furnished and does not qualify for the examplion stated in Section 110.07/200. Elevide States 14 others							

4. 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 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:

NATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4-16-9

305 832 5331 Daytine Phone #