

**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

**FILED**  
Apr 24 1996 8:00 am  
Secretary of State

DOCUMENT # **M17566 (4)**

1. Corporation Name

**THE NANNY NETWORK, INC.**



Principal Place of Business: % MICHAEL FERTIG, 20145 N.E. 25TH AVE., MIAMI FL 33180  
Mailing Address: % MICHAEL FERTIG, 20145 N.E. 25TH AVE., MIAMI FL 33180

3. Date Incorporated or Qualified: 07/02/1985  
3a. Date of Last Report: 05/01/1995  
4. FEI Number: 59-2566953  
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

2. Principal Place of Business (21-24)  
2a. Mailing Address (25-30)

9. Name and Address of Current Registered Agent  
MICHAEL FERTIG  
801 BRICKELL AVE., 24TH FLOOR  
MIAMI FL 33131

10. Name and Address of New Registered Agent  
81 Name: Michael Fertig  
82 Street Address: SE 3rd Ave 28th floor  
83 MIAMI FLORIDA  
84 City: MIAMI FL  
85 Zip Code: 33131

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 registered office or registered agent, or both, in the State of Florida. Such 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 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1 1 TITLE	[ ] Change [ ] Addition
NAME	FERTIG, RONI K.	12 NAME	
STREET ADDRESS	20145 N.E. 25 AVE.	13 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL 33180	14 CITY-ST-ZIP	
TITLE	[ ] DELETE	2 1 TITLE	[ ] Change [ ] Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	[ ] DELETE	3 1 TITLE	[ ] Change [ ] Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	[ ] DELETE	4 1 TITLE	[ ] Change [ ] Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	[ ] DELETE	5 1 TITLE	[ ] Change [ ] Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	[ ] DELETE	6 1 TITLE	[ ] Change [ ] Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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 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: Roni K Fertig Date: 4-16-96 Daytime Phone #: 305 932 5335

CR2E034 (12/95)