FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K72793** **(8)**

1. Corporate Name
RYTI, INC.

Principal Place of Business
1457 NE 163 ST MALL
N MIAMI BEACH FL 33138-2704

Mailing Address
1457 NE 163 ST. MALL
N MIAMI BEACH FL 33138-2704

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/15/1989**
3a. Date of Last Report: **08/10/1994**

2. Principal Place of Business
21
Suite Apt. # etc.
22
City & State
23
24 25

2a. Mailing Address
26
Suite Apt. # etc.
27
City & State
28
29 30

4. FEI Number: **65-0122449** ☐ 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 taxable or intangible tax under § 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
LIPNER, LARRY
1457 NE 163 ST. MALL
N MIAMI BCH FL 33162

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	LIPNER, LARRY
STREET ADDRESS	~~11720 SHERIDAN ST~~
CITY ST ZIP	~~PEMBROKE PINES FL~~
TITLE	D
NAME	ROSENBLAT, IRA
STREET ADDRESS	10430 SW 198TH ST
CITY ST ZIP	MIAMI FL
TITLE	~~D~~
NAME	~~LIPNER, ROY~~
STREET ADDRESS	~~311 BURR OAK AVENUE~~
CITY ST ZIP	~~DEERFIELD IL~~
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D ☒ Change ☐ Addition
NAME	LIPNER, LARRY
STREET ADDRESS	1457 NE 163 St. Mall
CITY ST ZIP	North Miami Bch., Fl 33162
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY ST ZIP	

14. I 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. Further, I certify that the annual report or the 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 that I have been empowered by them to execute this report as required by Chapter 607, Florida Statutes, and that my name appears above, or on an attached rider, or on an attachment with an address.

SIGNATURE: L. Lipner 4/12/95 (305)434-2275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0420174 FP