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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State

	1990	DIVISION OF	CORPORATIONS		
DOCUN 1. Corporation		048 (2)			
•	NT SECRETARIAL SERV	/ICES. INC.			
OI IF IT	II OLOHLIMINE OLIH	TOLO, IITO		<u> </u>	148
Principal Place of Business		Mailing Address			
C/O DAVID BROCK		C/O DAVID BROCK	F 000		
169 LINCOLN RD., STE 328 MIAMI BEACH FL 33139		169 LINCOLN RD., STI MIAMI BEACH FL 3313			
				3. Date Incorporated or Qualified 3a 07/26/1988	Date of Last Report 01/30/1995
2. Principal Pla	on of Business	2a. Mailing Address		4. FEI Number	Applied For
21	ice of Business	26]		65-0063077	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	-	5. Certificate of Status Desired [7]	\$8.75 Additional
22		27		<b>5.</b> Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> May Be
7ip	Country	<b>28</b>	Country	Trust Fund Contribution     This corporation has Fability for intangent in the second se	Added to Fees
24	25	29	30	Florida Statutes Yes	•
	9. Name and Address of C	and the contract of the contra	1. 1	10. Name and Address of New Regis	tered Agent
			81 Name		
BROCK, DAVID			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	COLN ROAD, SUITE 328 EACH FL 33139		83		
MIAMID	EXCIT FL 33139				
			84 City		FI 85 Zip Code
11. Pursuant to	the provisions of Sections 607	.0502 and 607.1508, Fiorida Statute	es, the above-named corpo	ration submits this statement for the purpose ard of directors. Thereby accept the appointm	of changing its registered office
or registere familiar witl	ed agent, or both, in the State of h, and accept the obligations of,	f Florida Such change was authorize Section 607.0505, Florida Statutes	ed by the corporation's bod	ird of directors. Thereby accept the appointm	ent as registered agent. Fam
SIGNATURE					
	Signature ityped or printed name of registere	d agent and tide if applicable (NO SIAND DIRECTORS	It: Flag Seed Agent sejectors respon	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
12.	D	DELETE	1 Tille	ADMINISTRATIONS TO OFFICE	Change Addition
NAME	GRANAT, RHODA		1.2 NAME		
STREET ADDRESS	169 LINCOLN RD., STE	328	1.3 STREET ADDR:55		
CITY ST-ZIP	MIAMI BEACH FL		1.4 CHY+S1, ZIP		<u> </u>
TITLE	DDOOR DAVID	☐ DETE IF	2 1 TITLE		Change Addition
NAME	BROCK, DAVID 169 LINCOLN RD., S. 37	)Q	2.2 NAME 2.3 STREET ADDRESS		
STREET ADDRESS  OTY-ST-76	MIAMI BEACH FL	.0	2.4 CHY - ST - ZH		
TITLE	In the section of	DELETE	3.1 TILE		Change Addition
NAME			3.2 NAM:		
STREET ADDRESS			3.3 STREET ADDRESS		
CiTY-S1-712			3.4 C/1Y-S1-Z/P		· ·
TITLE		☐ DELETE	4. 1 T'TLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
DITY-ST-ZIP TITLE		☐ DELETE	4.4 C(TY-ST-Z(I)' 5 1 T TLF	••	Change Addit-on
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CiTY-ST-ZIP			5.4 C/TY-S1-7/P		
TITLE		□ DELETE	6 1 TiTLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. Ldo hereby	certify that the information sup-	plied with this filing is voluntarily furn	■ 640HY-SEZP ished and does not qualify	for the exemption stated in Section 119.07(3)	(k) Florida Ŝtalutes, Uturther
	the information indicated on this	and in the survey of the survey for	and consect to the constance of	the good that more considered that bears the earns	level effect on if medic under

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:

| Compared | C