

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100555

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: NTH, INC.

**Current Principal Place of Business:**

3614 NEWPORT AVE.  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

229 SE 3RD AVE  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

229 SE 3RD AVE.  
POMPANO BEACH, FL 33060

**New Mailing Address:**

229 SE 3RD AVE  
POMPANO BEACH, FL 33060

FEI Number: 01-0840650

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD #221E  
PALM BEACH, FL 33410 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: TORRES, HUGO  
Address: 3614 NEWPORT AVE.  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP ( ) Delete  
Name: KAUFMAN, NICOLE  
Address: 3614 NEWPORT AVE.  
City-St-Zip: BOYNTON BEACH, FL 33436

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: TORRES, HUGO  
Address: 229 SE 3RD AVE  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP (X) Change ( ) Addition  
Name: KAUFMAN, NICOLE  
Address: 229 SE 3RD AVE  
City-St-Zip: POMPANO BEACH, FL 33060

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLE KAUFMAN

VP

04/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date