FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
• CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF \$1A1

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9300009386 (2)
NETTY-B (PUBLISHING & PRODUCTION), INC.

Principal Place of Business

Mailing Address

FILED May 06 1997 8:00am Secretary of State



3300 GLENDALE BLVD. FT. LAUDERDALE FL 33312		3300	3300 GLENDALE BLVD. FT. LAUDERDALE FL 33312-1943			3. Date Incorporated or Qualified 01/25/1993 3a. Date of Last Report 05/13/1996			
2. Principal P	Place of Business	2a, N	Mailing Address			4. FEI Number	1 100/1	U) 100	Applied For
21		├ ──¬	26			65-0392892	Not Applicable		
Sulte, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional		
22		27				5. Certificate of Status Desired			e Required
City & Stato			City & State			6. Election Campaign Financing	\$5.00 May Be		
Zip	Country	28	/ip	Countr		Trust Fund Contribution			ded to Fees
24]	25 29		30	у	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes \(\sigma\) No			er s. 199.032,	
	9. Name and Address of Curren		red Agent			10. Name and Address of New Re			
BRI	SSETT, ANNETTE			81	Name				
3300 GLENDALE BLVD.			82 Street Add		idress (P.O. Box Number is Not Acceptable)				
FI.	LAUDERDALE FL 33312				ļ				
				83	'				
				84	City		FL	85	Zip Code
44 Durayani	to the provisions of Cactions 607 010	32 and 607	11.00 Llorida Sta	tutos the shor	lo pamed oo	erporation submits this statement for the p ation's board of directors. I hereby accep	FL.) L	no ite topinlored
SIGNATURE	Signature, typed or printed name of registered ag	ent and title II a	applicable (N			ulrad which relistating) ADDITIONS/CHANGES TO OFFIC	DATE		
TITLE	PD		DELETE	1.1 1111.0				Cha	
NAME	BRISSETT, ANNETTE			1.2 NAME]				
STREET ADDRESS	3300 GLENDALE BLVD.			1.3 STREE	I ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33312			1.4 C/1Y-	SI-ZIP		• • • • • • • • • • • • • • • • • • • •		·
TITLE			☐ DELFTE	2.1 TillE			l	Char	nge []] Addition
NAME				2.2 NAME					
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP TITLE			DELFTE	2. 4 CITY- 3.1 TITLE	SI-ZIP			Chai	nge [] Addition
NAME			□ otten.	3.2 NAME			,		ige C_ //outlier
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP				3.4. CHY-	- 1				
TITLE			DELETE	4.1 7171,£				Cha	nge 🔲 Addition
NAME				4. 2 NAM	:				
STREET ADDRESS				4.3 STREE	1 ADORESS				
CITY-ST-ZIP				4.4 CITY-	\$1-2IP				,
TITLE			DELETE	5.1 TITLE			l	Chai	nge Addition
NAME				5.2 NAME					
STREET ADDRESS					1 ADDRESS				
CITY-ST-ZIP			The second	5.4 DITY-	ST-ZIP			—	
TITLE			☐ DELFTE	61 TITLE			l	Chai	nge 🔲 Addition
NAME				6.2 NAME					
STREET ADDRESS					1 ADDRESS				
CITY, CT. 7ID				GAPHY.					

4. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 logal effect as if made under oath; that I am an officer or director of the corporation or by receiver or furstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 23 if changed upon an attantional with an address.

CONSTUDE DENTE SECONO