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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400053971 (5)

NTY, INC.								
Principal Place of Business Mailing Address							0110 00101 04100 1HEAU ACAN 18010 1801	JOI 1981 1891
3950 RCA BOULEVARD 3950 RCA BOULEVARD								
SUITE 5003 SUITE 5003			103 ACH GARDENS FL 33410-4227					
PALM BEACH	GARDENS FL 33410	PALM BE	ACH GARDENS F	L 3341U-4227		3. Date Incorporated or Qualified	3a. Date of Last F	
						07/21/1994	02/28/1996	терит
2. Principal F	Place of Business	2a. Mailin	g Address			4. FEI Number		pplied For
21		26	0			65-0506919	<del> -'</del>	ot Applicable
Suite, Apt.	#, etc.	Suite,	Apt #, etc.					Additional
22		27				5. Certificate of Status Desired	Fee R	equired
City & Stat	le	City 8	State			6. Election Campaign Financing		May Be
23		28	·			Trust Fund Contribution		to Fees
Zip	Country	Zip		Country		8. This corporation has liability fo		3. 199.032,
24	25 9. Name and Address of Cu	29		30		Florida Statutes  10. Name and Address of New R	Yes No	
NO.		STERIC HOUSECHOU	yem	81	Name	TV. Hame and Address of their fi	ogistoreo Agent	
	:GUIRE, JEANIE TERPRISE DEVELOPMENT CI		090	Ľ.				·
	50 RCA BOULEVARD SUITE S		rbu	82	Street Add	dress (P.O. Box Number is Not Accepta	able)	
	LM BEACH GARDENS FL 334			83	· · · · · · · · · · · · · · · · · · ·		······································	
'^'	THE DESCRIPTION OF DO-	710						
				84	City		FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607	.0502 and 607.150	8, Florida Statute	s, the above	e-named cor	poration submits this statement for the		its registered
office or i agent. I a	registered agent, or both, in the s am familiar with, and accept the c	State of Florida, Suc obligations of, Secti-	ch change was a on 607.0505, Flo	uthorized by rida Statute:	the corpore s.	poration submits this statement for the ation's board of directors. I hereby according	opt the appointment as	registered
SIGNATURE	Signature, type for printed harrie of registers	denon a ditto depotes	ANOTE ANOTE	Or mintered Age	unt aircont sta	uired when reinstating)	DATE	
12.		AND DIRECTORS	inote (NOTE	13.	int skine.ure requ	ADDITIONS/CHANGES TO OFF		8S IN 12
TITLE	C	7.11.6. 6.11.6.7.6.1.6	DELETE	1.1 TITLE		1100110101010101010101010101010101010101	☐ Change	Addition
NAME	YOUNG, FRANK			1.2 NAME	[			<u></u>
STREET ADDRESS	1115 COUNTRY CLUB PR	ADO		1.3 STREET	ADDRESS			
GITY - S1 - ZIP	CORAL GABLES FL			1.4 CITY-S	- 1	•		
TITLE			DELETE	2.1 TITLE			Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CITY - S1 - ZIP				2 4 CiTY-:	ST-ZIP		v	
TITLE			DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME				
STREET ADDRESS	1			3.3 STREET	ADDRESS			
011Y-S1-7/P				34. DITY -	ST-ZIP			
DITLE			DELETE	4.1 TITLE			Change	Addition .
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STRE€1	ADDRESS			
C-TY - ST - ZIP				4.4 CITY - S	T-ZIP			
T)*LE			DELETE	51 TIFLE			☐ Change	Addition
NAME.				5.2 NAME				
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY-ST ZIP				5.4 CITY - S	T- ZIP			
TIFLE			DELETE	61 TITLE			Change	Addition
NAME				6.2 NAME	1			
STREET ADDRESS				6.3 STREET	ADDRESS			

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 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 chapted, or on an attachment with an address.

**FILED** 

Feb 05 1997 8:00am

Secretary of State