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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris ™

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

99 NOV 15 AM 9: 12

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT# P97000039484 4. Corpictation Name

Vector NTS, Inc.

Principal Period Business

Vector, NTS, Inc. 2000 PGA Boulevard Suite 2100 N.Palm Beach, FL 33408 Mailing Address

Vector NTS, Inc. 2000 PGA Boulevard Suite 2100

N.Palm Beach, FL 33408

	DO NOT WRITE IN TH	HIS SPACE
3. Date Incorporal	ted or Qualifed	

4 100 103

ì				4/20/9/						
2 Principal F	Tice of Business	2a. Mailing Addre	ss			4. FEI Number 65-0751469	-	Applied For Not Applicable		
Suite, Apt	#, etc	Suite, Apt. #,	etc.			5. Certifcate of Status Desired		5 Additional Required		
City & Stat	ter	City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be		
23 . Ziti	Country Zip			Country				eo to rees		
	Г (F 1 '		Contra		8. This corporation owes the current year Int	angible [] Yes	□No		
24	25	[29]	30	· · · ·		Personal Property Tax.		C140		
	9. Name and Address of Curren	r Kegistereo Agent		81	Name	10. Name and Address of New Registered	₩8eur			
Corner	rete Crestione En	tarnrinas	T n a	"	Maine					
Corporate Creations Enterprises, Inc. 4521 PGA Boulevard #211			inc.	82 Street Address (P.O. Box Number is Not Acceptable)						
Palm l	Beach Gardens, FL	33418		83						
				84	City		85 Z	ip Code		
				["	Only	FL	. 63 ~	ip 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 ASS: 3 fant Secretary 11-9-99										
	Signature, types or minted refine of registered agent	t and title if applicable	(NOTE Register	red Agent	signature re	Lired when reinstating) DATE				
. 12	OFFICERS ANI		13			ADDITIONS/CHANGES TO OFFICERS AN				
T: LE	D	DEI	LETE 1.1	TITLE			Chang	ge 🗌 Addition		
NAME	Mutinani, Tony		1.2	NAME	Ì					
STREET ADORESS	2000 PGA Blvd., Suite 2100			1.3 STREET ADDRESS		3000030533639 -11/23/9901069005				
C12+S1 ZiP	N Delm Rosch PI	32400	14	CITY-ST	-ZIP	- <u>1</u> 1/23/9901	069=-	-005		
* Icf	N.Palm Beach, FL	DEL	ETE 21	TITLE		****900.00	*国家学员	P ∏ Di7kddition		
NAME:	D		2.2	NAME	1					
STRUE LANGRESIS	Ryan, Kevin T.			23 STREET ADDRESS				ŀ		
(+1x+53+Z#+	200 PGA Blvd., S	uite 2100	2.4	CITY-ST	-7IP					
7,1,1	N. Palm Beach, F	L-33408 _{□ DEi}		TITLE	<u></u> -		Chang	e Addition		
NAME	D		3.2	NAME						
STHELL ADDRESS	McDermott, Rober	t ·	33	STREET	ADDRESS		N/	· TR		
City Style	2000 PGA Blvd.,	Suite 2100		CITY-ST	- 1	THE PERCENT	49	1 10		
Titus	N. Palm Beach, F.			TITLE		STATEMENT_	Char	Addition		
5156				NAME	- \	The state of the s				
STREE ADDRESS					ADDRESS			1.2		
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CC1 S 76		(DE		CITY-ST-	·ZIP		Chang	e Addition		
16.6	i	CI DEC		NAME			Chang			
NAME					*DODCCC			!		
STREET ADDRESS					ADDRESS					
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Tires		[] DEL	-,-		Ţ		☐ Chang	e 🗀 Addition		
NAU9	· Í			NAME						
STREET ADDRESS			6.3	STREET	ADDRESS					
COV.ST.ZIP			6.4	CITY-ST-	ZIP					

4. I 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 receiving or trustee employment to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Brock 12 or Block 13 if changed on an attact might with an address, with all gardening empowered.

SIGNATURE: