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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 1. Corporation Name

S64559

(5)

AHAOO	<b>NITTINGER</b>	DΔ
SUNIA	NILLINGEN	T.M.

SONIA NI	ittinger P.A.							
ncipal Place of Br	Business	Mailing Address			) iffiliere uib film Arabi Aride anie			
- •		10838 NO KENDALL D	R					
10838 NO KENDALL DR APT W-8 MIAMI FL 33176		APT W-8	APT W-8 Miami FL 33176 US		3. Date Incorporated or Qualified 3a. Date of Last Report			
					07/08/1991	1	4/24/199	
U\$		2a. Mailing Address			4. FEI Number	<u>.</u>	Ap	plied For
Principal Place of	of Business	28. Mailing Address			65-0273496			t Applicable
Suite, Apt. #, etc	le	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fea Re	
Juite, Apr. 11, Ci		27					\$5.00	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		Adkled 1	
		28	Count	ry	8. This corporation has liability for	intangible ta	x under s 1	99.032,
Zip I	Country	29	30		Florida Statutes Yes	s ∐No		
2	9. Name and Address of Curr				10. Name and Address of New I	Registered	Agent	
			Į <sup>8</sup>	1 Name				
NITTINGEF	R. SONIA		₹	2 Street Addr	ess (P.O. Box Number is Not Accepta	ble)		
	KENDALI. DR		};	13				
APT W-8			Ł				85 Zip	Code
MIAMI FL	33176		1	City	ration submits this statement for the part of directors. I hereby accept the ap	FL	_	
tamiliar with a	agent, or both, in the State of F and accept the obligations of, S							
	nature, typed or printed name of registered a	agent and title il applicable (N	OTE: Registered /	lgent signature require	o when reinstating:  ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTOR	RS IN 12
IGNATURE Sign	nature, typed or printed name of registered a	agent and title it applicable (N	OTE: Registered /		o when reinstating? ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	RS IN 12
SIGNATURE SIGNATURE 2.	or proted name of registered a OF FICERS	agent and title il applicable (N	OTE: Registered /	LE	so when renstating ADDITIONS/CHANGES TO OF	FICERS AN		RS IN 12
SIGNATURE Sign  2.  ITHE  IAME	OFFICERS  D NITTINGER, SONIA	agent and title it applicable (N	13. 1.1 TII	LE	o when renstating ADDITIONS/CHANGES TO OF	FICERS AN		RS IN 12
SIGNATURE SIGNATURE  12.  IIITE NAME STREEL ADDRESS	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and titre if applicable (N AND DIRECTORS	OTE: Registered A  13. 1. 1 TII 1.2 NA 1.3 STI 1.4 CII	LE ME REE1 ADDRESS Y+ST-ZIP	so when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	Change	Addition
SIGNATURE SIGNATURE ITTLE NAME STREEL ADDRESS DITY-ST-ZIP	OFFICERS  D NITTINGER, SONIA	agent and title it applicable (N	OTE: Registered A  13. 1. 1 TII 12 NA 1.3 STI 1.4 CII 2 1 TI	LE ME REE1 ADDRESS Y-ST-ZIP	o when reinstating? ADDITIONS/CHANGES TO OF	FICERS ANI		RS IN 12 Addition Addition
SIGNATURE Stgr.  12.  ITHE NAME STREEL ADDRESS CHY-SI-ZIP	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and titre if applicable (N AND DIRECTORS	13. 1.1 TII 12 NA 1.3 SII 1.4 CII 2 1 TI 22 NA	LE ME REE1 ADDRESS Y-ST-ZIP ILE ME	so when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	Change	Addition
SIGNATURE Stg:  12.  ITHE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and titre if applicable (N AND DIRECTORS	13. 1.1 Til 1.2 NA 1.3 STI 1.4 CII 2.2 NA 2.3 ST	LE ME ALET ADDRESS Y-ST-ZIP ILE ME REET ADDRESS	o when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change	Addition Addition
SIGNATURE  Styr  12.  IIILE  NAME  STREEL ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title 4 applicable (N AND DIRECTORS DELETE	13. 1.1 Til 1.2 NA 1.3 STI 1.4 CII 2.2 NA 2.3 ST	LE ME ALET ADDRESS Y-ST-ZIP ILE ME REET ADDRESS (Y-ST-ZIP	o when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	Change	Addition
SIGNATURE  Styr  12.  ITHE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and titre if applicable (N AND DIRECTORS	OTE: Registered J 13. 1.1Til 12 NA 13 STI 1.4 CI 2 1 TI 22 NA 2.3 ST 2.4 CI	LE ME REE1 ADDRESS Y-ST-ZIP TLE ME REE1 ADDRESS (Y-ST-ZIP TLE TLE	so when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change	Addition Addition
SIGNATURE  Styr  12.  THE  NAME  STREEL ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title 4 applicable (N AND DIRECTORS DELETE	OTE: Registered 3.  1.1 Till 12 NA 1.3 STI 1.4 CII 2 1 Til 22 NA 2.3 ST 2.4 CI 3.1 Til 32 NA	LE ME REE1 ADDRESS Y-ST-ZIP TLE ME REE1 ADDRESS (Y-ST-ZIP TLE TLE	so when reinstating?  ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change	Addition Addition
SIGNATURE  Sty  12.  ITHE  NAME  STREEL ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title 4 applicable (N AND DIRECTORS DELETE DELETE	OTE: Registered 13. 1.1Til 12 NA 1.3 STI 1.4 CII 2 1 TI 2 2 NA 2.3 ST 2.4 CI 3.1 TI 32 NA 33.S 3.4 CI	LE  ME  REE1 ADDRESS  Y-ST-ZIP  TLE  ME  REE1 ADDRESS  IY-ST-ZIP  TLE  MME  TLE  MME  TLE  MME  TLE  TLE	o when reinstating?  ADDITIONS/CHANGES TO OF	FICERS ANI	Change  Change	Addition Addition
SIGNATURE  Sty  12.  ITHE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title 4 applicable (N AND DIRECTORS DELETE	OTE: Registered / 13. 1.170 12.NA 1.3.SU 1.4.CU 2.1.TU 22.NA 2.3.SU 2.4.CU 3.1.TU 32.NA 4.CU 4.1.T	LE ME REE1 ADDRESS Y-ST-ZIP ILE ME REE1 ADDRESS IY-ST-ZIP ILE MME IY-ST-ZIP ILE IME ITHEET ADDRESS IY-ST-ZIP ITHEET ADDRESS IY-ST-ZIP	o when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change	Addition  Addition
SIGNATURE  Signature  ILL  SIGNATURE  INTE  IAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title 4 applicable (N AND DIRECTORS DELETE DELETE	0TE: Registered / 13. 1.1TH 12 NA 13 STH 14 CH 21 TH 22 NA 23 ST 24 CH 3.1TH 32 NA 33.S 34 CH 4.1TH 42 NA 42	LE ME ME REE1 ADDRESS Y-ST-ZIP TLE LY-ST-ZIP TLE MME ME REE1 ADDRESS LY-ST-ZIP TILE MME THEE1 ADDRESS LY-ST-ZIP THEE1 ADDRESS LY-ST-ZIP THEE1 ADDRESS LY-ST-ZIP THEE	o when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	Change  Change	Addition  Addition
SIGNATURE  SIGNATURE  SIGNATURE  ITHE  IAME  STREEI ADDRESS  CITY-ST-ZIP  ITHE  NAME  STREET ADDRESS  CITY-ST-ZIP  ITHE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title 4 applicable (N AND DIRECTORS DELETE DELETE	OTE: Registered J  13. 1.1 TII 1.2 NA 1.3 STI 2.4 CII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 S 3.4 CI 4.1 T 4.2 N 4.3 S	LE ME ME REE1 ADDRESS Y-ST-ZIP ILE ME REE1 ADORESS IY-ST-ZIP TLE MME IREE1 ADDRESS IY-ST-ZIP ILE MME IREET ADDRESS IY-ST-ZIP ILE AME IREET ADDRESS	so when renstating ADDITIONS/CHANGES TO OF	FICERS ANI	Change  Change	Addition  Addition  Addition
SIGNATURE  SIGNATURE  12.  IIITLE  NAME  STREEI ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title of applicable (N AND DIRECTORS DELETE DELETE DELETE	OTE: Registered J  13. 1.1 TII 1.2 NA 1.3 STI 2.4 CII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 S 3.4 CI 4.1 T 4.2 N 4.3 S	LE ME ME REE1 ADDRESS Y-ST-ZIP ILE ME REE1 ADDRESS IY-ST-ZIP TLE MME IREE1 ADDRESS IY-ST-ZIP ILE AME IREE1 ADDRESS IY-ST-ZIP ILE AME	so when renstating?  ADDITIONS/CHANGES TO OF	FICERS ANI	Change  Change	Addition  Addition
SIGNATURE  SIGNATURE  12.  ITHE  NAME  STREEI ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title 4 applicable (N AND DIRECTORS DELETE DELETE	OTE: Registered / 13. 1.170 12.NA 13.ST 1.4.CT 2.170 2.3.ST 2.4.CT 3.170 32.NA 33.S 34.CT 42.NA 43.S 44.C	LE ME ME REEI ADDRESS Y-ST-ZIP I'LE ME REEI ADORESS IY-ST-ZIP TLE MME IREEI ADDRESS IY-ST-ZIP I'LE AME IREEI ADDRESS MIY-ST-ZIP I'LE AME IREEI ADDRESS MIY-ST-ZIP I'LE	so when reinstating?  ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
SIGNATURE  SIGNATURE  SIZ.  ITHE  NAME  STREET ADDRESS  DITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title of applicable (N AND DIRECTORS DELETE DELETE DELETE	OTE: Registered / 13. 1.1 Till 1.2 NA 1.3 STI 1.4 CII 2.1 Til 2.2 NA 2.3 ST 2.4 CI 3.1 Til 3.2 NA 3.3 S 3.4 CI 4.1 T 4.2 N 4.3 S 4.4 C	LE ME ME REEI ADDRESS Y-ST-ZIP I'LE ME REEI ADORESS IY-ST-ZIP TLE MME IREEI ADDRESS IY-ST-ZIP I'LE AME IREEI ADDRESS MIY-ST-ZIP I'LE AME IREEI ADDRESS MIY-ST-ZIP I'LE	addition of Additi	FICERS ANI	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
SIGNATURE  SIGNATURE  12.  ITHE  NAME  STREEI ADDRESS  CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title of applicable (N AND DIRECTORS DELETE DELETE DELETE	OTE: Registered / 13. 1.171/ 1.2 NA 1.3 STI 1.4 CII 2.1 TI 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA 3.3 S 3.4 CI 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S	LE ME ME REE1 ADDRESS Y-ST-ZIP I'LE ME REE1 ADDRESS IY-ST-ZIP TLE MME IREE1 ADDRESS IY-ST-ZIP I'LE AME IREE1 ADDRESS ITY-ST-ZIP I'LE AME IREE1 ADDRESS ITY-ST-ZIP I'LE AME IREE1 ADDRESS ITY-ST-ZIP I'LE AME	ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  NAME	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	agent and title of applicable (N AND DIRECTORS DELETE DELETE DELETE	OTE: Registered / 13. 1.171/ 1.2 NA 1.3 STI 2.4 CO 2.1 TO 2.2 TO 3.1 TO 3.2 NA 2.3 ST 2.4 CO 3.1 TO 3.2 NA 4.3 S 4.4 CO 5.1 TO 5.2 NA 5.3 S 5.4 CO 5.1 TO 5.2 NA 5.3 S 5.4 CO 6.1	LE ME REEI ADDRESS Y-ST-ZIP ITLE ME REEI ADDRESS IY-ST-ZIP TLE LIMBE ITHEEI ADDRESS IY-ST-ZIP ITLE AME ITHEEI ADDRESS ITY-ST-ZIP ITLE AME ITHEEI ADDRESS ITY-ST-ZIP ITLE AME ITHEEI ADDRESS ITY-ST-ZIP ITTE AME ITHEEI ADDRESS ITY-ST-ZIP ITTE	over renstating ADDITIONS/CHANGES TO OF	FICERS ANI	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS  D NITTINGER, SONIA 10838 NO KENDALL DR	gent and tit of applicable (N AND DIRECTORS DELETE DELETE DELETE DELETE	OTE: Registered / 13. 1.171/ 1.2 NA 1.3 STI 2.4 CO 2.1 TO 2.2 NA 2.3 ST 2.4 CO 3.1 TO 3.2 NA 3.3 S 3.4 CO 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 6.2 P	LE ME REEI ADDRESS Y-ST-ZIP ITLE ME REEI ADDRESS IY-ST-ZIP TLE LIMBE ITHEEI ADDRESS ITY-ST-ZIP ITLE AME	addition of Additi	FICERS ANI	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
SIGNATURE  SIGNATURE  12.  TITLE  NAME  STREEI ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	D NITTINGER, SONIA 10838 NO KENDALL DR MIAMI FL	gent and title if applicable (N AND DIRECTORS DELETE DELETE DELETE DELETE	OTE: Registered J.  13. 1.1 TH  1.2 NA  1.3 STH  2.4 CH  2.3 STH  2.4 CH  3.1 TH  3.2 NA  3.3 S  3.4 CH  4.1 T  4.2 N  4.3 S  4.4 C  5.1 T  5.2 N  5.3 S  6.1 6.2 H  6.3 S	LE  ME REEI ADDRESS Y-ST-ZIP  ILE  ME REEI ADDRESS IY-ST-ZIP  ILE  IME IREEI ADDRESS IY-ST-ZIP  IILE  AME IREEI ADDRESS IY-ST-ZIP  IILE AME IREEI ADDRESS ITY-ST-ZIP  ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITL	in when renetating ADDITIONS/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS	FICERS ANI	☐ Change ☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition

SIGNING OFFICER OR DIRECTOR