

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

FILED

Jan 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 200522 (1)
1. Corporation Name
PAUL NOTOWITZ, INC.



Principal Place of Business Mailing Address
16855 NE 2 AVE 302-B 16855 NE 2 AVE 302-B
N. MIAMI BEACH FL 33162 N. MIAMI BEACH FL 33162

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 8177 W. Glades Rd. 26 8177 W. Glades Rd.
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 217 27 217
City & State City & State
23 Boca Raton, FL 28 Boca Raton, FL
Zip Country U.S.A. Zip Country U.S.A.
24 33434 25 ~~Boca Raton~~ 29 33434 30 ~~Boca Raton~~

3. Date Incorporated or Qualified
03/06/1957
4. FEI Number 59-0826820 Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees
8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
NOTOWITZ, SCOTT
16855 NE 2ND AVE, #302-B
N. MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
8177 W. Glades Rd.
83 # 217
84 City Boca Raton FL 85 Zip Code 33434

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 [Signature] (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE ☐ DELETE
NAME PD
STREET ADDRESS NOTOWITZ, RUTH
CITY-ST-ZIP 5002 N BAY RD
MIAMI BEACH FL 33140
TITLE ☐ DELETE
NAME VPD
STREET ADDRESS KUTUN, JUDITH
CITY-ST-ZIP 2012 FISHER ISLAND DR
FISHER ISLAND FL 33109
TITLE ☐ DELETE
NAME SD
STREET ADDRESS NOTOWITZ, SCOTT
CITY-ST-ZIP 20123 NE 19TH PL
N MIAMI BCH. FL 33179
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 6526 NW 33 Ave.
3.4 CITY-ST-ZIP Boca Raton, FL 33496
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 changed, or on an attachment with an address.

SIGNATURE [Signature] 1/20/98 File # 882-2338

CR2E034 (10/97)