FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

FILED
Jan 24 1997 8:00am
Secretary of State

DOCUMENT # **683235** **(6)**

1. Corporation Name

JORDAN BITTEL, P.A.

Principal Place of Business

11501 SW 72 CT
MIAMI FL 33156
US

Mailing Address

11501 SW 72 CT
MIAMI FL 33156-4622
US

3. Date Incorporated or Qualified **08/27/1980**		**3a.** Date of Last Report **04/02/1996**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number **59-2021199**	Applied For
21		26			Not Applicable
Suite, Apt #, etc. 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State 23		City & State 28		6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent	
BITTEL, JORDAN **11501SW 72 COURT** **MIAMI FL 33156**	81	Name
	82	Street Address (P.O. Box Number is Not Acceptable)
	83	
	84	City **FL**	85	Zip Code

11. Pursuant to the provisions of Sections 607.1502 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 *Jordan Bittel*   JORDAN BITTEL   1-15-97
Signature typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE **DPST**		☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME **BITTEL, JORDAN**			1.2 NAME			
STREET ADDRESS **11501 SW 72ND CT**			1.3 STREET ADDRESS			
CITY-ST-ZIP **MIAMI FL**			1.4 CITY-ST-ZIP			
TITLE **VPAS**		☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME **BITTEL, JUDITH**			2.2 NAME			
STREET ADDRESS **11501 SW 72 CT**			2.3 STREET ADDRESS			
CITY-ST-ZIP **MIAMI FL**			2.4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

CR2E034 (9/96)

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 changed, or on an attachment with an address.

SIGNATURE: *Jordan Bittel*   JORDAN BITTEL   1-15-97   305-238-9940
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #