

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90374 022 \*\*\*150.00

**DOCUMENT # K50498**

1. Entity Name  
**THE GOTTLIEB GROUP, INC.**



Principal Place of Business  
**% BRUCE M. GOTTLIEB  
125 NORTH 46TH AVENUE  
HOLLYWOOD, FL 33021**

Mailing Address  
**% BRUCE M. GOTTLIEB  
125 NORTH 46TH AVENUE  
HOLLYWOOD, FL 33021**



02182006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0091078**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**GOTTLIEB, BRUCE M.  
125 NORTH 46TH AVENUE  
HOLLYWOOD, FL 33021**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
GOTTLIEB, BRUCE M.  
125 NORTH 46TH AVENUE  
HOLLYWOOD, FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
GOTTLIER, BRUCE M  
125 NORTH 46TH AVENUE  
HOLLYWOOD, FL 33021**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**April 11, 2006**

Date

**(954) 966-7900**

Daytime Phone #

#K50498

40051060

**Gottlieb & Gottlieb**  
ATTORNEYS AT LAW

**ATTACHMENT**

A Professional Association  
www.gottlielaw.com

Bruce M. Gottlieb

125 NORTH 46TH AVENUE, HOLLYWOOD, FLORIDA 33021-6601

Broward 954-966-7900

Kenneth A. Gottlieb

Dade 305-624-4777

Toll Free 800-330-7900

Fax 954-966-7905

Division of Corporations  
P. O. Box 1500  
Tallahassee, FL 32302

April 11, 2006

RE: 2006 Annual Report – The Gottlieb Group, Inc.

OUR FILE NUMBER: 4698

Gentlemen:

Enclosed, for filing with the Florida Department of State, is the 2006 Annual Report for The Gottlieb Group, Inc., together with the appropriate filing fee of \$150.00. Please file as required.

Very truly yours,

GOTTLIEB & GOTTLIEB,  
ATTORNEYS AT LAW, P.A.

  
\_\_\_\_\_  
Bruce M. Gottlieb

BMG/aw  
Enclosures