

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 20, 1999 8:00 am
Secretary of State

07-20-1999 90008 039 ***150.00

DOCUMENT # M19522

1. Corporation Name

BARRY E. WITLIN, P.A.

Principal Place of Business

1200 SOUTH PINE ISLAND ROAD
SUITE 230
PLANTATION FL 33324

Mailing Address

1200 SOUTH PINE ISLAND ROAD
SUITE 230
PLANTATION FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/16/1985

4. FEI Number

36-3352220

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes



No

9. Name and Address of Current Registered Agent

ARONSTAM, JENNIFER
1200 SOUTH PINE ISLAND RD.
SUITE 230
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 607.0502 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME WITLIN, BARRY E.
STREET ADDRESS 1200 SOUTH PINE ISLAND RD. STE. 230
CITY-ST-ZIP PLANTATION FL 33324

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRY E. WITLIN

Date

Daytime Phone #

6/30/99

934-473-4500

CR2E034 (5/99)

0066784

BARRY E. WITLIN, P.A.
ATTORNEY AT LAW

CORNERSTONE ONE
SUITE 230
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FLORIDA 33324

BROWARD (954) 473-4500
DADE (305) 576-4999
FAX (954) 473-1970

591133-90008-39
M19522

June 30, 1999

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

re: BARRY E. WITLIN, P.A.

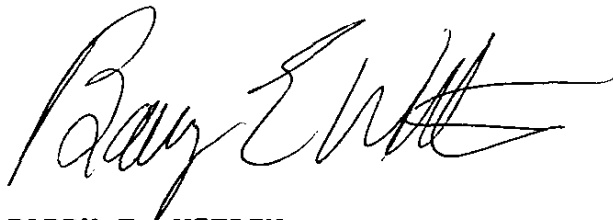
Gentlemen:

On June 30, 1999, I received a second request for a 1999 Profit Corporation Annual Report. In checking my records I determined that on April 24, 1999, I wrote check #: 2339, from my office account, in the amount of \$150.00 to pay for the original filing fee.

Today I contacted my bank and found that the original check had not been negotiated and my replacement check is enclosed herewith.

Please accept this as my payment in full for the required fee.

Very truly yours,



BARRY E. WITLIN

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Enclosure