


2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Mar 08, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000100533
 1. Entity Name
 GOTTLIEB INVESTMENTS, INC.



Principal Place of Business Mailing Address
 20300 S DIXIE HWY 20300 S DIXIE HWY
 MIAMI, FL 33189 MIAMI, FL 33189

DO NOT WRITE IN THIS SPACE



01082004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 65-1057120 Not Applicable

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

6. Name and Address of Current Registered Agent
 GOTTLIEB, MICKEY
 20300 S DIXIE HWY
 MIAMI, FL 33189

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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

000000080702
 03/08/04-80121-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GOTTLIEB, MICKEY
STREET ADDRESS	20300 S DIXIE HWY
CITY - ST - ZIP	MIAMI, FL 33189
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. 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 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: *Mickey Gottlieb* Date: 2/25/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #