**FILED** 

## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR

## Mar 17, 2003 8:00 am § Secretary of State P01000118645 DOCUMENT # 1. Entity Name 03-17-2003 91074 036 \*\*\*150.00 QUITTNER GROUP, INC. Principal Place of Business Mailing Address 560 LINCOLN ROAD 560 LINCOLN ROAD SUITE 204 SUITE 204 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 30-0025228 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name <u>Evan R. Marbin, Esquire</u> QUITTNER, ROBERT Street Address (P.O. Box Number is Not Acceptable) **560 LINCOLN ROAD** 48 East Flagler Street SUITE 204 Penthouse\_104 MIAMI BEACH FL 33139 Zip Code Miami 33131 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 or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstation) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME QUITTNER, DENIS A NAME 560 LINCOLN ROAD SUITE 204 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP TITLE ☐ Delete TITLE D/P/T K Change ☐ Addition NAME QUITTNER, ROBERT NAME STREET ADDRESS 560 LINCOLN ROAD SUITE 204 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP TITLE D/VP/S ☐ Delete TITLE X Change ☐ Addition NAME QUITTNER: JEFFREY NAME STREET ADDRESS 560 LINCOLN ROAD SUITE 204 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33139 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filin 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 of the corporation or the receiver or trustee empoy changed, or on an attachment with an address, w

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STREET-ADDRESS

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TITLE

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SIGNATURE:

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TITLE

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NAME

☐ Delete

□ Delete

Robert Quittner President

3/11/03 (305)371-2248

Change

Change

☐ Addition

☐ Addition