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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200006034 (2)
1. Corporation Name

FILED Jan 20 1998 8:00am Secretary of State

BITTONG CONSULTING, INC. Mailing Address Principal Place of Business 7123 FOSTER LANE 7123 FOSTER LANE ORLANDO FL 32818 ORLANDO FL 32818 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/19/1992 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 21 26 59-0155622 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country Zip This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BITTONG, KARLHEINZ 7123 FOSTER LANE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32818 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stgnature, typed or printed name of registerical agent and title if applicable DATE (NOTE: Registered Agest is gnature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 1111.0 TITLE BITTONG, KARLHEINZ NAME 1.2 NAME 7123 FOSTER LANE STREET ADDRESS 1.3 STREFT ADDRESS ORLANDO FL 32818 CITY-ST-ZIP 1.4 CHY-ST-ZIP DELETE Change Addition THLE 211IILE BITTONG, ESPERANZA NAME 2.2 NAME 7123 FOSTER LANE 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32818 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THLE MARTINKA, BENEDICT J 3.2 NAME NAME 2215 CRUGER AVE #6.G STREET ADDRESS 3 3 STREET ADDRESS **BRONX NY 10467** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STHEET ADDRESS CITY-ST-2IP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-7IP 5.4 CHY - ST - 7IP DELETE Change Addition 6.1 TITLE TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby 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 logal 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.

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