FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300001352

BERNARD GITTELSON CONSULTANT, INC.

Principal Place of Business	
6808 CORRAL CIR	

Mailing Address

6808 CORRAL CIR

FILED Jan 22, 1999 8:00am **Secretary of State** 01-22-1999 90055 001 ***150.00



SARASOTA FL 34243	SARASOTA FL 3	SARASOTA FL 34243		DO NOT WRITE IN THIS SPACE			
			3	Date Incorporated or Qualifed 01/01/1993			
2. Principal Place of Business	2a. Mailing Add	ress	4	l. FEI Number	Applied For		
	26			65-0376488	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #	, etc.	5	6. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State	•	6	i. Election Campaign Financing ' Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip 29	Country 30	8	 This corporation owes the current year Personal Property Tax. 	Intangible		
9. Name and Address of Current Registered Agent			10	10. Name and Address of New Registered Agent			
	ANNOTE FOR EX	81	Name				
HAWKINS, MICHAEL 330 SOUTH PINEAPPLE AVENUE #0106		82	Street Address (P.O. Box Number is Not Acceptable)				
SARASOTA FL 34236		83					
·		84	City		. 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 of the original 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: Ri	egistered Agent signature r	required when reinstating) OATE		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTOR	RS IN 12
TITLE	D DELETE	1.1 TITLE	党、党任总 组	Change	☐ Addition
NAME ,	GITTELSON, BERNARD	1.2 NAME			
STREET ADDRESS	6808 CORRAL CIR	1.3 STREET ADDRESS		,	
CITY-ST-ZIP	SARASOTA FL 34243	1.4 CITY-ST-ZIP			
TITLE .	- DELETE	2.1 TITLE		☐ Change	Addition
NAME		2.2 NAME			
STREET ADDRESS	"	2.3 STREET ADDRESS			
CITY-ST-ZIP	1.0. (Section Medical Property Control of the Person of th	2. 4 CITY-ST-ZIP			
TITLE 1235	Scheduler (1945) (1945	3.1 TITLE		☐ Change	☐ Addition
NAMES ES SO		3.2 NAME			
OTDEET ASSOCIATION	ASCITA DE GERRO	3.3 STREET ADDRESS	ন প্ৰতিষ্ঠালয় কৰিছে বিশ্বস্থা কৰিছে ইয়া । বিশ্বস্থানীয়া বিশ্বস্থানীয়া বিশ্বস্থানীয়া বিশ্বস্থানীয়া ।	(Berner of	C
CITY-ST-ZIP		3.4, CITY-ST-ZIP		说:	1 6 38
TITLE	☐ DELETE	4.1 TITLE	,	☐ Change	Addition
NAME POST COST 1	5% √1.5 ≥ 1.5	4. 2 NAME			
STREET ADDRESS	55 43 B	4.3 STREET ADDRESS			
CITY-ST-ZIP	•	4.4 CITY-ST-ZIP			
TITLE	☐ DELETE	5.1 TITLE	,	Change	☐ Addition
NAME		5.2 NAME	(1) St. (6) 3		
STREET ADDRESS	ė.	5.3 STREET ADDRESS			
CITY-ST-ZIP	January and the control of the contr	5.4 CITY-ST-ZIP	191 - 47년4월부		
TITLE	OF STEDUCE AND ACCOUNT DELETE	6.1 TITLE	•	Change	☐ Addition
NAME	- 6899 CORPAL CIR Constructor of const	6.2 NAME	<u> </u>		
STREET ADDRESS	[\$4)44.5(1)4.10 (104)	6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 C/TY-ST-ZIP			

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 empropered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or an attachment with any address with all other like empowered.