

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

FILED

Jan 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000012976 (3)

1. Corporation Name

THE LAW OFFICES OF SCHWARTZBERG & WITT, P.A.



Principal Place of Business

463 30TH STREET NORTH  
ST. PETERSBURG FL 33713

Mailing Address

463 30TH STREET NORTH  
ST. PETERSBURG FL 33713-7721

2. Principal Place of Business

21 721 1ST AVE NO.

Suite, Apt. #, etc.

22 City & State  
23 St. Petersburg, Florida

Zip

24 33701

Country

25 U.S.A.

2a. Mailing Address

26 721 1ST AVE NO.

Suite, Apt. #, etc.

27 City & State  
28 St. Petersburg, Florida

Zip

29 33701

Country

30 U.S.A.

3. Date Incorporated or Qualified

02/13/1995

3a. Date of Last Report

06/27/1996

4. FEI Number

59-3296755

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WITT, WILLIAM T ESQ.  
463 30TH STREET NORTH  
ST. PETERSBURG FL 33713

10. Name and Address of New Registered Agent

81 Name

WILLIAM T. WITT

82

Street Address (P.O. Box Number is Not Acceptable)

721 1ST AVE NO.

83

84

City St. Petersburg

FL

85 Zip Code 33701

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 filed applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME SCHWARTZBERG, MICHAEL S E S  
STREET ADDRESS 463 30TH STREET NORTH  
CITY-ST-ZIP ST. PETERSBURG FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME WILLIAM T. WITT  
1.3 STREET ADDRESS 721 1ST AVE NO.  
1.4 CITY-ST-ZIP St. Petersburg, FL. 33701

2.1 TITLE D  
2.2 NAME MICHAEL S. SCHWARTZBERG  
2.3 STREET ADDRESS 721 1ST AVE NO.  
2.4 CITY-ST-ZIP St. Petersburg, FL. 33701

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

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

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

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

14. I do 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: *William T. Witt* WILLIAM T WITT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

17 JAN 97 813-822-3600

CR2E034 (9/96)