

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

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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000084287

1. Corporation Name

WITMAN INVESTMENT CONSULTING, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 7131 NW 46TH ST LAUDERHILL FL 33319 US		Mailing Address 7131 NW 46TH ST LAUDERHILL FL 33319 US	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip Country		28 Zip Country	
24		29	
25		30	
9. Name and Address of Current Registered Agent			
MOUNTFORD, DAVID W 10242 NW 47TH ST SUITE 27 SUNRISE FL 33351			
10. Name and Address of New Registered Agent			
81 Name DAVID W. MOUNTFORD			
82 Street Address (P.O. Box Number is Not Acceptable) 7131 NW 46th St.			
83			
84 City LAUDERHILL			
85 Zip Code FL 33319			
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 <i>DAVID W. MOUNTFORD</i> DATE			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE PRESIDENT, CEO			
1.2 NAME DAVID W. MOUNTFORD			
1.3 STREET ADDRESS 7131 NW 46th St.			
1.4 CITY-ST-ZIP LAUDERHILL, FL 33319			
2.1 TITLE SECRETARY			
2.2 NAME MARSHA MOUNTFORD			
2.3 STREET ADDRESS 7131 NW 46th St.			
2.4 CITY-ST-ZIP LAUDERHILL, FL 33319			
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 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, with all other like empowered.

SIGNATURE: *DAVID W. MOUNTFORD* DAVID W. MOUNTFORD

Date

954 572-3600
Daytime Phone #

CR2E034 (11/98)