


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2004 08:00 AM
Secretary of State

| | |
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| DOCUMENT # P97000030776 1. Entity Name VITMAN GROUP, INC. |  |
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Principal Place of Business
468 DE LEON DRIVE
MIAMI SPRINGS, FL 33166

Mailing Address
468 DE LEON DRIVE
MIAMI SPRINGS, FL 33166



02192004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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|-----------------------------|-------------------------------|
| 4. FEI Number 65-0749617 | Applied For Not Applicable |
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5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARQUEZ, JOSE M
782 NW LEJEUNE RD
SUITE 548
MIAMI, FL

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D VITERI, ISABEL 468 DEON DRIVE MIAMI SPRINGS, FL 33166 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BERMAN, SOPHIE V 5555 COLLINS AVE APT 15-D MIAMI BEACH, FL 33140 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BERMAN, JAY 4895 LAKE CECILE DRIVE KISSIMMEE, FL 34746 |
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12. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/2004

Date

305-987-6664

Daytime Phone #