## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 27, 2002 8:00 amSecretary of State

DOCUMENT # P 970000 38685  1. Entity Name					05-27-2002 90447 049 ***150.00	
	ITTNER SECURITI	ES, INC.				
	DO NOT WRITE	IN THIS S	PACI			
	Place of Business	3. Mailing Address	<u>. ఆ గ్రామంలో స</u>			
5999 Central Ave Suite, Apt. #, etc.		5999 Central Ave				
4th FLOOR		Suite, Apt. #, etc. 4th FLOOR			DO NOT WRITE IN THIS SPACE	
City & Sta	ale TERSBURG FL	City & State 57 PETERSB	U06	<i></i>	4. FEI Number	Applied For
Zip	Country	Zip	Country	FL	59-3448491	Not Applicable
<i>3</i> 3 7 <i>1</i>	O USA	<sup>Zip</sup> 33710	<u>Us</u>			8.75 Additional see Required
				Name	7. Name and Address of Current Registered A	\gent-
DO NOT WRITE				KATHR	YN A. WOODARD	
	IN THIS SP	Committee and the second of th		5999 Ce	P.O. Box Number is Not Acceptable)	7
		AUL.		4th FU	DOR	
Company of the second				City ST PA	ETERSBURG FL	Zip Code <b>337/0</b>
8. The above	e named entity submits this statement for	the purpose of changing its	registered	office or registere	ed agent, or both, in the State of Florida.	337/0
SIGNATURE						
SIGNATURE	Signature, typed or printed name of registered agent ar	ed title if applicable. (NOT	E: Registered Ag	ent signature required t	sitien reinstating) DATE	
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.  Grid on back)	- Amende	1, Fee is \$	550.00 61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11.	OFFICERS AND D	Make Check Payat	pie to Depa	rtment of State		
TITLE	PP		TITLE.	F 4 F3 7		
NAME STREET ADDRESS	Thomas Cannizzaro 5999 Central Ave, 4+	FLOOR	NAME	anguig i		
CITY-ST-ZIP	ST PETERSBURG, FL 3		STREET AL	<ol> <li>★ TOSEMON FOR ALL FOR AL</li></ol>		
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NAME STREET ADDRESS	KATURYN A. WOODAR	D YHH FLOOR	NAME	14 14 14		
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NAME STREET ADDRESS I	. <del> </del>		NAME			
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TREET ADDRESS			NAME			
ITY+ST-ZIP			STREET ADD	Maria Barana A		
ITLE .			TITLE			ANTENNESS IN TRACTOR AND
AME TREET ADDRESS	, , ,	•	NAME (			
ITY- S1- ZIP			STREET ADO	敬止 化氯甲酚 建硫矿 建		
3. I hereby co	ertify that the information supplied with th	is filing does not qualify for t	N. O. W. P. Springer	(2011年1月2日 - 100 · 100	on 119.07(3)(i). Florida Statutes. I further certify the	
of the corp	ortains report of supplemental report is trusted empowers trusted empower or trusted empowers with an additional control of trusted empowers.	ue and accurate and that my cred to execute this report	signature s	half have the san	on 119.07(3)(i). Florida Statules. I further certify the ne legal effect as if made under oath; that I am a Florida Statutes; and that my name appears in I	hat the information n officer or director
	A La Maria de la like prince	Wer Comment	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-, 0.00,000,	int my name appears in I	Block 11 or on an
SIGNATI	URE: IMMU/				- 4/5/nv	
	SIGNATURE AND TYPED OF PRIN	TED NAME OF SIGNING OFFICER OF	DIRECTOR		Date Davons	Phone #