## 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 # P9700065209

1. Corporation Name

WINTHROP CONSULTING GROUP, INC.

# **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90145 049 \*\*\*150.00



Principal Place of Business Mailing Address		
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3201 SOUTH OCEAN BLVD. #801 3201 SOUTH OCEAN BLVD. #801		
HIGHLAND BEACH FL 33487 HIGHLAND BEACH FL 33487 DO NOT WRITE IN THIS	S SPACE	
3. Date Incorporated or Qualifed		
07/25/1997		
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Ap	plied For
21 7171 N. FOO HANY 26 7171 N Fed HANY 65-0768669	No	t Applicable
Suite Ant # etc.	\$8.75 A	Additional
5. Certificate of Status Desired	Fee Re	quired
City & State Election Campaign Financing	\$5.00	May Be
23. See RATON FL 28 BEA RATON FL. Trust Fund Contribution	Added to	o Fees
Zip Country Zip Country 22 Zip Country 23 334 87 30 Personal Property Tax.		□No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered	Agent	
81 Name		
GOLDSTEIN, DONALD I 82 Street Address (P.O. Box Number is Not Acceptable)		
3201 SOUTH OCEAN BLVO. #801		
HIGHLAND BEACH FL 33487		
	ae Zin C	`-da
[   Ref   City   FL	_  85   Zip C	Joue
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 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 appearagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	f changing its intment as reg	registered gistered
SIGNATURE		
Signature, typed or printed name of registered agent and tritle if applicable (NOTE: Registered Agent signature required when reinstating) DATE		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS A		DC IN 12 1
TITLE D DELETE 1,1 TITLE		
	Change	Addition
NAME GOLDSTEIN, DONALD I 12 NAME	Change	
NAME GOLDSTEIN, DONALD I 1.2 NAME STREET ADDRESS 3201 SOUTH OCEAN BLVD. #801 1.3 STREET ADDRESS	[] Change	
NAME         GOLDSTEIN, DONALD I         1.2 NAME           STREET ADDRESS         3201 SOUTH OCEAN BLVD. #801         1.3 STREET ADDRESS           CITY-ST-ZIP         HIGHLAND BEACH FL 33487         1.4 CITY-ST-ZIP		☐ Addition
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NAME   GOLDSTEIN, DONALD	Change	☐ Addition
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14. 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 trystee 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 adapticess, with all other like empowered.

<del>NEG</del>UIRED SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #