

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90152 014 ***150.00

DOCUMENT # V18272

1. Corporation Name

LAURENCE S. LITOW PA

Principal Place of Business

Mailing Address

~~25 BISCAYNE BLVD.~~
~~SUITE 3100~~
MIAMI FL 33131

~~25 BISCAYNE BLVD.~~
~~SUITE 3100~~
MIAMI FL 33131



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/03/1992

4. FEI Number

65-0318125

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

777 BRICKELL AVENUE

26 777 BRICKELL AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1200

27 1200

City & State

City & State

Zip Country

25

Zip Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LITOW, LAURENCE S

~~25 BISCAYNE BLVD., SUITE 3100~~

~~ONE BISCAYNE TOWER~~

MIAMI FL 33131

81 Name

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

777 BRICKELL AVENUE

83

SUITE 1200

84 City

FL

85 Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

LAURENCE S. LITOW

4/30/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME LITOW, LAURENCE S

STREET ADDRESS ~~25 BISCAYNE BLVD., #3100~~

CITY-ST-ZIP MIAMI FL 33131

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

777 BRICKELL AVENUE, SUITE 1200

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAURENCE S. LITOW

4/30/99

Date

305-810-6525

Daytime Phone #

CR2E034 (11/98)