

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000159392

**FILED**  
**Jan 22, 2024**  
**Secretary of State**  
**9440346824CC**

**Entity Name:** HOUTKIN CONSULTING CORP.

**Current Principal Place of Business:**

2295 NW CORPORATE BLVD.  
SUITE 230  
BOCA RATON, FL 33431

**Current Mailing Address:**

2295 NW CORPORATE BLVD.  
SUITE 230  
BOCA RATON, FL 33431

**FEI Number:** 20-1836237

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HOUTKIN, MICHAEL F  
2295 NW CORPORATE BLVD.  
SUITE 230  
BOCA RATON, FL 33431 US

*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.*

**SIGNATURE:** MICHAEL F. HOUTKIN

01/22/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            HOUTKIN, MICHAEL F.  
Address        2295 NW CORPORATE BLVD., SUITE  
                  230  
City-State-Zip: BOCA RATON FL 33431

Title            SEC  
Name            HOUTKIN, MICHAEL SEC/TRE  
Address        2295 NW CORPORATE BLVD., SUITE  
                  230  
City-State-Zip: BOCA RATON FL 33431

Title            VPRE  
Name            HOUTKIN, SHERRY V PRES  
Address        2295 NW CORPORATE BLVD., SUITE  
                  230  
City-State-Zip: BOCA RATON FL 33431

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL HOUTKIN

**PRESIDENT**

01/22/2024

Electronic Signature of Signing Officer/Director Detail

Date