

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000119160

**Entity Name:** BITTYRE, INC.

**Current Principal Place of Business:**

9735 OLD ST AUGUSTINE RD  
SUITE 13  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

P.O. BOX 600070  
SAINT JOHNS, FL 32260 US

**FEI Number:** 20-5566178

**Certificate of Status Desired:** No

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

BITTY-REID, MARIE M  
9735 OLD ST AUGUSTINE RD  
SUITE 13  
JACKSONVILLE, FL 32257 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name BITTY-REID, MARIE M  
Address P.O. BOX 600070  
City-State-Zip: SAINT JOHNS FL 32260

*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:** MARIE BITTY-REID

**PRESIDENT**

**04/30/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date