

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 187061

**Entity Name:** WYNNEWOOD GIFTS, INC.

**Current Principal Place of Business:**

4400 RICKENBACKER CAUSEWAY  
MIAMI, FL 33149

**Current Mailing Address:**

% MICHAEL BROWN  
3195 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134

**FEI Number:** 59-0752887

**Certificate of Status Desired:** No

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

BROWN, MICHAEL S  
3195 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134 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 D/C/CEO/AS/AT  
Name HERTZ, ARTHUR H  
Address 3195 PONCE DE LEON BLVD.  
City-State-Zip: CORAL GABLES FL 33134

Title D/P/COO/S/T  
Name BROWN, MICHAEL S  
Address 3195 PONCE DE LEON BLVD.  
City-State-Zip: CORAL GABLES FL 33134

Title COMPTROLLER/V  
Name TOLEDO, ANA M  
Address 3195 PONCE DE LEON BLVD.  
City-State-Zip: CORAL GABLES FL 33134

Title V/DF  
Name MOODY, SHERRYL K  
Address 3195 PONCE DE LEON BLVD.  
City-State-Zip: CORAL GABLES FL 33134

*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:** ANA M. TOLEDO

V/COMPTROLLER

03/06/2013

Electronic Signature of Signing Officer/Director Detail

Date