


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 02  
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DOCUMENT # 520123		
1. Entity Name WEITZ & SCHWARTZ, P.A.		
Principal Place of Business 3601 W. COMMERCIAL BLVD SUITE 31 FORT LAUDERDALE, FL 33309	Mailing Address 3601 W. COMMERCIAL BLVD SUITE 31 FORT LAUDERDALE, FL 33309	
DO NOT WRITE IN THIS SPACE		



01072005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1710340	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  WEITZ, JEFFREY L. 3601 W. COMMERCIAL BLVD, SUITE 31 FORT LAUDERDALE, FL 33309	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WEITZ, JEFFREY L. 4075 SW 103RD AVENUE DAVIE FL,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD SCHWARTZ, ERIC R. 10160 S.W. 2ND ST. PLANATATION, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 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

JEFFREY L. WEITZ, PRESIDENT

4/29/05 (954) 484-3544

Date

Daytime Phone #