2006 FOR PROFIT CORPORATION DOCUMENT # 568639 1. Entity Name WEISS INVESTMENT CORPORATION Principal Place of Business 6818 ESTATE ROAD LAKELAND, FL 33809 US Mailing Address 6818 ESTATE ROAD LAKELAND, FL 33809 US DO NOT WRITE IN THIS SPACE

FILED Jan 30, 2006 8:00 am Secretary of State

01-30-2006 90048 001 ***150.00

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No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1818572

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

	6. Name and Address of Current Regis	tered Agent			
GOUGH, LAURA M 6818 ESTATE ROAD LAKELAND, FL 33809			DO NOT WRITE IN THIS SPACE		
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and	accept
SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered	d Agent signisture required when reinstating)	. OATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	 Election Campaign Finan Trust Fund Contribution. 	cing S5.00 May Be Added to Fees		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP WEISS, DOROTHY M 400 S. FLORIDA AVENUE, APT. 601 LAKELAND, FL. 23061 73 86	6818 ESTATE RP.			
TITLE Name Street address City-St-Zip	VP WEISS, DONALD E 5753 N.W. 125TH AVENUE CORAL SPRINGS, FL 33076				
TITI E Name Street address City-St-Zip	ST GOUGH, LAURA M 6818 ESTATE ROAD LAKELAND, FL 33809		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE	
TITLE Name Street adoress City-St-Zip					
OTTLE NAME STREET ADDRESS CITY-ST-ZIP					
				9, Florida Statutes, I further certify that the informatic as if made under oath; that I am an officer or direct	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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!

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

Laura M. GoutH

1/20/06

863)858-7982

Daytime Phone #