

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Feb 23, 2007 08:00 A
Secretary of State**DOCUMENT # F00000000715**

1. Entity Name

WESTWOOD RARE COIN GALLERY, INCORPORATED



Principal Place of Business

P.O. BOX 31
TAPPAN, NY 10983

Mailing Address

P.O. BOX 31
TAPPAN, NY 10983**DO NOT WRITE IN THIS SPACE**

02122007 No Chg-P CR2E034 (11/05)

4. FEI Number

22-2278513

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

DOMINICK, WILLIAM
6894 RAIN LILY ROAD #203
NAPLES, FL 34109**DO NOT WRITE
IN THIS SPACE**

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

Signature of person or persons authorized to sign this report as required by law.

NOTE: Registered Agent signature is required when reinstating.

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****10. OFFICERS AND DIRECTORS**P
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DOMINICK, WILLIAM
21 QUAIL RUN
OLD TARPAN, NJ 07675TITLE
NAME
STREET ADDRESS
CITY- ST- ZIPTITLE
NAME
STREET ADDRESS
CITY- ST- ZIPTITLE
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NAME
STREET ADDRESS
CITY- ST- ZIPU00000645481
03/05/07-80008-025 150.00**DO NOT WRITE
IN THIS SPACE**

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 or power.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Dominick 2/20/07 239-514-

Date

Telephone

4355