

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 11, 2006 8:00 am**  
**Secretary of State**

05-11-2006 90243 001 \*\*\*150.00

**DOCUMENT # F05000003945**

1. Entity Name

ELCID ASSOCIATES, INC.



Principal Place of Business

12000 N. BAYSHORE DRIVE UNIT 105  
N. MIAMI FL 33181

Mailing Address

12000 N. BAYSHORE DRIVE UNIT 105  
N. MIAMI FL 33181



2. Principal Place of Business

12000 N. Bayshore Dr  
Suite, Apt. #, etc.  
# 105  
City & State  
N. Miami, FL -  
Zip  
33181  
Country  
Dade

3. Mailing Address

SAME  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0775174

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE CPD ☐ Delete  
NAME WEINSTEIN, SIDNEY  
STREET ADDRESS 12000 N. BAYSHORE DRIVE UNIT 105  
CITY-ST-ZIP N. MIAMI FL 33181

TITLE VC ☐ Delete  
NAME WEINSTEIN, SIDNEY  
STREET ADDRESS 12000 N. BAYSHORE DRIVE UNIT 105  
CITY-ST-ZIP N. MIAMI FL 33181

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/01/06

786-201-7407

ATTACHMENT  
40090900  
FO5000003945

Please excuse my late payment due to the fact that I thought I had sent this check out in March but I just found this form yesterday in my office. The reason I guess I forgot was that I have been getting cancer treatments since the beginning of March until the end of April and was in a lot of pain all that time. This was the reason my mind was not working to full capacity and I didn't even think about the form.

I am really sorry that this is getting to you a week late but I hope you will accept the \$150 instead of the \$550 penalty that I see you have on the form. I have not been working for some time now and just cannot afford this at this time.

I want to thank you for this consideration, Sid Weinstein.