

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortonham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 22 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000003035 (2)

1. Corporation Name

WESTON HOLDING GROUP INC.

Principal Place of Business

135 E. 57TH ST., #31
NEW YORK NY 10022

Mailing Address

135 E. 57TH ST., #31
NEW YORK NY 10022

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/10/1994

3a. Date of Last Report

2. Principal Place of Business

21 500 EAST BROWARD BLVD

2a. Mailing Address

26 500 EAST BROWARD BLVD

Suite, Apt. #, etc.

22 SUITE 1003

Suite, Apt. #, etc.

27 SUITE 1003

City & State

23 FORT LAUDERDALE, FLORIDA

City & State

28 FORT LAUDERDALE, FLORIDA

Zip

24 33394

Country

25 BROWARD

Zip

29 33394

Country

30 BROWARD

4. FEI Number

13-3724383

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PDC
NAME LIEGEY, JOHN R.
STREET ADDRESS 115 E. 87TH ST., #39D
CITY-ST-ZIP NEW YORK NY 10128

TITLE D
NAME LIEGEY, JEAN R.
STREET ADDRESS 1400 SW 55TH AVE.
CITY-ST-ZIP PLANTATION FL 33317

TITLE VSD
NAME MAHONEY, EDWARD
STREET ADDRESS 6 COMANCHE CT.
CITY-ST-ZIP KATONAH NY 10538

TITLE T
NAME TAYLOR, KARIN
STREET ADDRESS 50-58 245TH ST.
CITY-ST-ZIP DOUGLSTON NY 11362

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PDC ☒ Change ☐ Addition
1.2 NAME LIEGEY, JOHN R.
1.3 STREET ADDRESS 2509 SEA ISLAND DRIVE
1.4 CITY-ST-ZIP FORT LAUDERDALE, FLORIDA 33313

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE S ☒ Change ☐ Addition
3.2 NAME MEDIRATTA, AJATA
3.3 STREET ADDRESS 35 WEST 90TH STREET
3.4 CITY-ST-ZIP NEW YORK, NEW YORK 10024

4.1 TITLE T ☒ Change ☐ Addition
4.2 NAME MARSHALL, JOSEPH A. JR.
4.3 STREET ADDRESS 2509 SEA ISLAND DRIVE
4.4 CITY-ST-ZIP FORT LAUDERDALE, FLORIDA 33313

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John R. Liegey

JOHN R. LIEGEY

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-95

Date

305-525-9460

Typed Name