

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 15, 1999 8:00 am
Secretary of State

04-15-1999 90132 004 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K25648

1. Corporation Name
THE WEINBACH GROUP, INC.



Principal Place of Business 5900 S.W. 78TH STREET 301 MIAMI FL 33143 US	Mailing Address 5900 S.W. 73RD STREET 301 MIAMI FL 33143 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified. 06/08/1988	Applied For Not Applicable
4. FEI Number 65-0053347	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

KRAMER, ROBERT M.
200 S. PARK RD
SUITE 460
HOLLYWOOD FL 33021

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	WEINBACH, N P
STREET ADDRESS	10201 SW 121 ST
CITY-ST-ZIP	MIAMI FL
TITLE	ST <input type="checkbox"/> DELETE
NAME	WEINBACH, ELAINE R.
STREET ADDRESS	10201 SW 121ST ST.
CITY-ST-ZIP	MIAMI FL
TITLE	D <input type="checkbox"/> DELETE
NAME	WEINBACH, DOUGLAS W
STREET ADDRESS	130 PINE RISE COURT
CITY-ST-ZIP	ALPHARETTA GA
TITLE	D <input type="checkbox"/> DELETE
NAME	WEINBACH, LISA S
STREET ADDRESS	130 PINE RISE COURT
CITY-ST-ZIP	ALPHARETTA GA
TITLE	D <input type="checkbox"/> DELETE
NAME	WEINBACH, RANDI
STREET ADDRESS	478 NE 92ND STREET
CITY-ST-ZIP	MIAMI SHORES FL
TITLE	D <input type="checkbox"/> DELETE
NAME	WEINBACH, DANIEL MATTHEW
STREET ADDRESS	478 NE 92ND STREET
CITY-ST-ZIP	MIAMI SHORES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	10850 Grenadier Lane
3.3 STREET ADDRESS	Alpharetta GA 30022
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	10850 Grenadier Lane
4.3 STREET ADDRESS	Alpharetta GA 30022
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	7505 SW 129 St.
5.3 STREET ADDRESS	Miami FL 33156
5.4 CITY-ST-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	7505 SW 129 St.
6.3 STREET ADDRESS	Miami FL 33156
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: E. SIGNATURE REQUIRED 4/13/99 305-668-0070
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)