Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90013 005 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L02899

1. Corporation Name

WEIN ENTERPRISES INC.

									<u> </u>	
Principal Place of Business Mailing Address										
509 NE 43RD STREET			509 NE 43RD STREET							
FT. LAUDERDALE FL 33334		9.	9717 N. NEW RIVER CANAL RD			VAL RD	DO NOT WRITE IN THIS SPACE			
			PLANTATION, FL 33324				3. Date Incorporated or Qualifed 07/19/1989			
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		Applied For	
21			26				65-0139290		Not Applicab	уle
Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State			City & State				6. Election Campaign Financing	\$5.0	O May Be	
23			28				Trust Fund Contribution Added to Fees			
Zip	Country		Zip Country				8. This corporation owes the current year Intangible			
24	25	29					Personal Property Tax.			
	9. Name and Address of Curre	nt Regist	tered Agent		_		10. Name and Address of New Registered	Agent		
MEIN OTAOV					31	Name				
WEIN, STACY 500 NE 40 STREET 9777 N. NEW RIVER CAMALY ET. LAUDERDALE FE 33334 UNIT 4/0				(B	32	Street Add	ress (P.O. Box Number is Not Acceptable) A. NEW RIVER SANAL RD			
ET. LAUDERDALE FE 33334 UN (410 ITATION FL 33		33		17 410			_
					34			FL 85 Zip Code 333 14		
							-ANTATION FL			
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florid	a. Such change was auth	orized l	ov ti	-named corp he corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appo	changing i intment as	ts registered registered	1
SIGNATURE										-
	Signature, typed or printed name of registered ag				gent	signature require	ed when reinstating) DATE	10 DIDEO:	TODO IN 10	
12.	OFFICERS A	ND DIRE		13.		<u></u>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT		
TITLE	D -		☐ DELETE	1.1 TITL			JEIN, DANIEL		, <u></u>	
NAME	WEIN, DANIEL 509:NE-43RD-STREET 97/7	NA	W RIVERCANAL	1.2 NAM			717 H. NEW RIVER CANAL R.	D - UA	45416	,
STREET ADDRESS	509 NE PORD ALE EL MAN	٠,٠,٠	RD RD			address 9	DIANTE OF CARACIO		,,,,,	ł
CITY-ST-ZIP	FT. LAUDERDALE FL PL	NIATI	10 N FL 33324	1.4 CITY		-ZiP	PLANTATION, FL 33324	☐ Change	e ∏Addi	ition
TITLE				2.1 TITU		1	WEIN STACY		*	3011
NAME	WEIN, STACY	Z IV. NE	W RIVER CANAL RR	2.2 NAM			CTITY ALVONO BLUES CANA	4180 .	UNIT U	,,
STREET ADDRESS	WEIN, STACY 509 NE 43RD STREET 97/7 N. NEW RIVER CANAL RR FT + ANDERDALE FI PLANTATION, FL 3332.4				EET/	ADDRESS	9717 N. NEW RIVER CANALIED -UNIT 4/10 PLANTATION FL 33324			
CITY+ST+ZIP				2. 4 CIT			PLANTATION FL 33374		A TOTAL	# <u>~</u> =
TITLE ST			DELETE	3.1 TITL	_			□ Citaligi	3	1011
NAME r				3.2 NAM						
STREET ADDRESS						ADDRESS				Ì
CITY-ST-ZIP	•			3.4. CIT		-ZIP		Chann	. 🗆 🗖	
TITLE			☐ DELETE	4.1 TITL				Change	e ∏Addi	1011
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NAME				5.2 NAV		.anarca				{
STREET ADDRESS	•					ADDRESS				
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TITLE	•		☐ DELETE	6.1 TITE					e 🗌 Addi	idon i
NAME				6.2 NAM						
STREET ADDRESS				6.3 STREET ADDRESS						
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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.

CR2E034 (11/98)