

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095226

Entity Name: WEIN GROUP, L.L.C.

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

9717 N. NEW RIVER CANAL ROAD, #410
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

9717 N. NEW RIVER CANAL ROAD, #410
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 20-5687324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEIN, DANIEL
9717 N. NEW RIVER CANAL ROAD, #410
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WEIN, DANIEL
Address: 9717 N. NEW RIVER CANAL ROAD, #410
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Delete
Name: WEIN, DOROTHY
Address: 68 MARKHAM D
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGRM (X) Delete
Name: WEIN, ROBERT
Address: 230 W. 105 STREET
City-St-Zip: NEW YORK, NY 10025

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: WEIN, ROBERT
Address: 230 W. 105 STREET
City-St-Zip: NEW YORK, NY 10005

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL WEIN

MGRM

01/07/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date