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PROFIT CORPORATION **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L83548

1. Corporation Name

ALAN H. WEINGARTEN & ASSOCIATES, INC.

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90002 032 ***150.00



712711	·						
Principal Place	of Business	Mailing Address					P1011 21511 1591
21759 CLUB VILLA TERRACE 21759 CLUB VILLA TERRACE			ERRACE				
BOCA RATON FL 33433 BOCA RATON FL 33433			133		DO MOT WOLF IN T	UO 00105	
·					DO NOT WRITE IN TH	IIS SPACE	
					3, Date Incorporated or Qualifed		
		La Maille Adding			06/25/1990 4. FEI Number		pplied For
	ace of Business	2a. Mailing Address			65-0209505	<u> </u>	ot Applicable
21	<u>*</u>	Suite, Apt. #, etc			05 0209303	\$8.75	
Suite, Apt.	#, etc.	——————————————————————————————————————	. /		5. Certifcate of Status Desired	Fee Re	
City & State		City & State	-/ -		6. Election Campaign Financing	\$5.00	May Be
City & State		, 	My di Glate		Trust Fund Contribution	Added	
Zip	Country	Zip /	Čoi	Intry	8. This corporation owes the current year		
24	25	29	30	•	Personal Property Tax.	Yes	No No
	9. Name and Address of Currer				10. Name and Address of New Register	ed Agent	
				81 Name			
	IGARTEN, ALAN H.			82 Street A	Address (P.O. Box Number is Not Acceptable)		
21759 CLUB VILLA TERRACE				Street Address (P.O. Box Number is Not Acceptable)		•	
BOC	A RATON FL 33433			83			
}						las Zie	Code
				84 City	F	85 Zip	Code
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida S	Statutes, the a	bove-named	corporation submits this statement for the purpose	of changing its	registered
l office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change v	vas authonze	a by the corpo	ration's board of directors. I hereby accept the ap	oointment as re	gistered
	III IAUTURAL WILLI. ARGU ACCEDI GLE ODIIGA	Meus di accion por osse					
1	11/2 11/1/00-11				DELEGALNE H	11190	
SIGNATURE	Man H. Wengan	le. ALAN H	4,WEIN	GARNEN	PRESIDENT H	1499	
1	Man H Wellingar Signature, typed or printed name of registered age	le. ALAN H	4,WEIN	GARNEN	PRESTORY DATE: ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DRS IN 12
SIGNATURE/	Man H Wellingar Signature, typed or printed name of registered age	e_ ALAN A	(NOTE: Registered	GARNEN d Agent signature re		AND DIRECTO	DRS IN 12
SIGNATURE	Signature, typed of printed name of registered age OFFICERS AN	e ALAW H nt and titl if applicable. ND DIRECTORS	(NOTE: Registered	GARNEP d Agent signature re			
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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.