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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED
May 09 1997 8:00am
Secretary of State

DOCUMENT # M15150 (9) JACK L. WEITZMAN, P.A.							
Principal Place	e of Business	Mailing Address				LILII OIDII OIBII DIQII BA	
11420 S.W. 109 RD. 11420 S.W. 109 RD MIAMI FL 33176-3148 US US							
					3. Date Incorporated or Qualified 05/08/1985	3a. Date of Last 08/09/1996	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	4	\pplied For
21	n	26			59-2529886 Not Applicable		
Suite, Apt	#, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	0 May Be
Z _{ip}	28 Country Zip Cour		Country		Trust Fund Contribution 8. This corporation has liability for in		t to Fees s. 199.032,
24	25	29	30	·- ····-		Yes No	
Name and Address of Current Registered Agent WEITZMAN, JACK L.				10. Name and Address of New Registered Agent 81 Name			
11420 S.W. 109 RD.			82	Street Addr	ess (P.O. Box Number is Not Acceptable	e)	· · · · · · · · · · · · · · ·
MIA!	MI FL 33176		83		MAPA TO COMPANY OF THE COMPANY OF TH		
			84	City		—. 85 Zip	Code
44 8	1.10	100 1100 1100 1100 1100 1100 1100 1100	1	' '		- FL	
11. Pursuant to office or reasont. I are	egistered agent, or both, in the State m familiar with, and accept the oblig	or and 607, 1508, Horida Statu of Florida, Such change was jations of, Section 607,0505, Fl	ies, the abov authorized b orida \$tatute	e-named corp y the corporal s.	poration submits this statement for the policin's board of directors. Thereby accep	urpose of changing I the appointment a	its registered
SIGNATURE	Signature, typed or printed name of registered ag-				reo when reliestating)	DATE	
12.	OFFICERS AN	D DIRECTORS	13.	and sign and the recipion	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE			1111111			Change	Addition 3
NAME STREET ADDRESS	WEITZMAN, JACK L. 11420 S. W. 109 RD.		1.2 NAMI 1.3 STREET ADDRESS				[8
CITY-ST-ZIP	MIAMI FL		1.4 CHY-5				1
TITLE			2.1 1111.6			Change	Addition
NAME			22 NAME				
STREET ADDRESS	s			ADDRESS			}
CITY-ST-ZIP TITLE	T DELETE		2 4 CHY- 3.1 THUE	S1-7IP		Change	Addition
NAME			3.2 NAME			C Change	
STREET ADDRESS			7	I ADDRESS			
CITY-ST-ZIP			8.4. CHY-				
TITLE		DELFTE	4.1 THEF			Change	Addition
NAME			4, 2 NAME	II			
STREET ADDRESS			4.3 S18EE	ADDRESS			
CITY-ST-ZIP			4.4 COY-	S1 - Z(P			
TITLE		DELETE B171		1		Change	: Addition
NAME			E 2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CHY-1	ST-ZIP		☐ Change	Addition
NAME .		f") orceit	G 1 TOLE G 2 NAME			L_ Change	LI AGOITOT
STREET ADDRESS				I ADDRESS			
CITY-ST-ZIP			64 CITY-	ł			}
	by certify that the information supplic	ed with this filing doos not qual			d in Section 119.07(3)(i), Florida Statutes	s. I further certify the	at the

14. I do hereby certify that the information supplied with this filing doos not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther 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 logal 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 13 if changed, or on an attachment with an address.

CICMATUDE

Jack To Millianing

4/20/07

(205) 596-5207