

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M36126** (4)

1. Corporation Name

LAW OFFICES OF PHILIP T. WEINSTEIN, P.A.



Principal Place of Business

**2250 S.W. 3RD AVENUE
5TH FLOOR
MIAMI FL 33129-2210**

Mailing Address

**2250 S.W. 3RD AVENUE
5TH FLOOR
MIAMI FL 33129-2210**

3. Date Incorporated or Qualified

08/01/1986

3a. Date of Last Report

01/24/1995

2. Principal Place of Business

21. State, Apt., etc.

22. City & State

23. Zip

25. Country

2a. Mailing Address

26. State, Apt., etc.

27. City & State

28. Zip

30. Country

4. FEI Number

59-2717045

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**WEINSTEIN, PHILIP T.
2250 S.W. 3RD AVENUE
5TH FLOOR
MIAMI FL 33125-9094**

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 607.1506, 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 Sections 607.0502, Florida Statutes.

SIGNATURE

(Signature of Registered Agent required if changed)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

2. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

3. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

4. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

6. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

7. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

8. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

9. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

10. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

11. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

12. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

13. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

14. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

2. TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

3. TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

4. TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

5. TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

6. TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE: **X**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Philip T. Weinstein, P.A.

X-1-25-96

Date

Daytime Phone

CR2E034 (12/95)