


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90022 029 \*\*\*\*61.25

<b>DOCUMENT # N04000004917</b> 1. Entity Name <b>THE WEINSTEIN MITZVAH FOUNDATION, INC.</b>																													
Principal Place of Business <b>333 LAS OLAS WAY 1510 FORT LAUDERDALE, FL 33301</b>			Mailing Address <b>333 LAS OLAS WAY 1510 FORT LAUDERDALE, FL 33301</b>																										
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		4. FEI Number <b>20-0494933</b>																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
City & State		City & State		Applied For Not Applicable																									
Zip		Country		6. Name and Address of Current Registered Agent																									
City & State		City & State		7. Name and Address of New Registered Agent																									
Zip		Country		Name																									
City & State		City & State		Street Address (P.O. Box Number is Not Acceptable)																									
Zip		Country		City																									
City & State		City & State		Zip Code																									
8. 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. I am familiar with, and accept the obligations of registered agent.																													
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)																													
Filing Fee is \$61.25 Due by May 1, 2008																													
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																													
Make check payable to Florida Department of State																													
10. OFFICERS AND DIRECTORS																													
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																													
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: <u>RITA WEINSTEIN</u>																													
Date: <u>3/28/08</u> Daytime Phone #: <u>954-24-7365</u>																													