

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P01000042503

1. Entity Name

SANFORD WEINSTEIN, INC.



FILED
Aug 04, 2008 08:00 AM
Secretary of State

Principal Place of Business

2130 NE 211TH STREET
NORTH MIAMI BEACH, FL 33179 US

Mailing Address

2130 NE 211TH STREET
NORTH MIAMI BEACH, FL 33179 US



07092008

No Chg-P

CR2E034 (11/05)

4. FEI Number

65-1112828

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WEINSTEIN, SANFORD
2130 NE 211TH STREET
NORTH MIAMI BEACH, FL 33179

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	WEINSTEIN, SANFORD
STREET ADDRESS	2130 N.E. 211TH STREET
CITY- ST- ZIP	NORTH MIAMI BEACH, FL 33179
TITLE	V
NAME	WEINSTEIN, JAMES M
STREET ADDRESS	2130 N.E. 211TH STREET
CITY- ST- ZIP	NORTH MIAMI BEACH, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000956800
08/04/08-80001-004 150.00

**DO NOT WRITE
IN THIS SPACE**

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #