

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016281

FILED
Apr 30, 2004
Secretary of State

Entity Name: WEISMAN ENTERPRISES, INC.

Current Principal Place of Business:

3530 BISCAYNE BLVD
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

3530 BISCAYNE BLVD
MIAMI, FL 33137

New Mailing Address:

FEI Number: 59-1438210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIAMOND, KEITH P.A.
46 SW 1ST STREET
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: ALVAREZ, MANUEL
Address: 591 NW 34 STREET
City-St-Zip: MIAMI, FL 33127

Title: PD () Delete
Name: WEISMAN, MOLLIE
Address: 3530 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

Title: VP () Delete
Name: WEISMAN, DAVID
Address: 3530 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

Title: SD () Delete
Name: JACKMAN, MICHELLE
Address: 3530 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: OCANA GARCIA, REYNALDO
Address: 591 NW 34 STREET
City-St-Zip: MIAMI, FL 33127

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID WEISMAN

VP

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date