

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000135385

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: WEBERMAN TRADITIONAL FOODSERVICE CORPORATION

**Current Principal Place of Business:**

330 NE 59TH STREET  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 402764  
MIAMI BEACH, FL 33140

**New Mailing Address:**

FEI Number: 20-1893828

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEBERMAN, DAVID  
330 NE 59TH 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: PD ( ) Delete  
Name: WEBERMAN, DAVID  
Address: 1215 BIARRITZ DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: V ( ) Delete  
Name: WEBERMAN, SHAYA  
Address: 330 NE 59TH STREET  
City-St-Zip: MIAMI, FL 33137

Title: S ( ) Delete  
Name: WEBERMAN, SHLOMO  
Address: 7900 TATUM WATER WAY DRIVE APT 206  
City-St-Zip: MIAMI BEACH, FL 33141

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: WEBERMAN, SHAYA  
Address: 3500 MYSTIC POINTE DRIVE  
City-St-Zip: AVENTURA, FL 33180

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 WEBERMAN

PRES

03/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date