FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400034385 (2)

WEINER FAMILY HOLDING CORP.

FILED Jan 24 1997 8:00am Secretary of State

Principa: Place of Business Mailing Address 550 S. OCEAN BLVD. BOCA RATON FL 33432 BOCA RATON FL 33432-6264									
					3. Date Incorporated or Qualified 05/06/1994		of Last Re 3/1996	eport	
Principal Place of Business 2e, Mailing Address				***************************************	4. FE! Number			plied For	
21 26				22-3303998			ot Applicable		
Suite, Apt #, etc Suite, Apt. #, etc. 27					5. Certificate of Status Desired		\$8.75 A		
City & State City & State				·	6. Election Campaign Financing \$5.00 May Be				
23		28	C		Trust Fund Contribution		Added t		
Zip	Country Zip Count 25 29 30			ry	B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	25 g, Name and Address of Cu		[30]		10. Name and Address of New I				
TH			8	1 Name	10,				
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST.				2 Street Add	dress (P.O. Box Number is Not Acceptable)				
Suite 105 Tallahassee FL 32301			8		The state of the s				
IA	LLANASSEE PL 32301						T1		
			В	4 City		FL	85 Zip (Code	
SIGNATURE	Signature, typed or printed name of registore	oligations of, Section 607.0505, Floor and little diagnitisation (NOTE AND DIRECTORS			ulred when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTOR	RS IN 12	
TITLE	P	T DELETE	1.1 TITLE		ADDITIONS/CFIANGES TO OF		Change	Addition	
NAME	WEINER, HOWARD B	٠	1.2 NAM	ì					
STREET ADDRESS	SEA OO OODAN BURD AD	7. 107		ET ADDRESS					
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY	1					
TITLE		DELETE	2.1 TITLE				Change	Addition	
NAME			2.2 NAM	E					
STREET ADDRESS			2.3 STRE	ET ADDRESS					
City-St-zip			2. 4 CiTY	-ST-ZIP					
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NAME			3.2 NAM					ŧ	
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CITY - ST - ZIP		DELETE	3.4. CITY				Change	Addition	
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NAME		_	62 NAM	- 1		•	7	ļ	
STREET ADDRESS				ET ADDRESS				İ	
CITY-ST-ZIP			64 CITY	i					
14. I do here	eby certify that the information sup	plied with this filing does not qualit	fy for the e	kemption state	ed in Section 119.07(3)(i), Florida Stati	utes. I further	certify that	the	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the 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 12 or Block 33 changed. of one attack them with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

13/97 SE) 391-077.