**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000087615

1. Corporation Name

MARTIN S. WIENER CO., INC.

Principal Place of Business	Mailing Address
6624 N.W. 23RD TERR. Boca Raton Fl 33496	6624 N.W. 23RD TERR. BOCA RATON FL 33496

## Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90039 009 \*\*\*150.00



Principal Place of Busin	ness	Mailing Address				- ( (#4)(#4) tif (#tit filet gatti gatti gatti gatti gatti	Teit i <b>nn</b> en	atiat ita	idi din taan
6624 N.W. 23RD TERR. BOCA RATON FL 33496			DO NOT WRITE IN THIS	SPACE					
						3. Date Incorporated or Qualifed			
						12/02/1994			
2. Principal Place of B	usiness	2a. Mailing Address				4. FEI Number			ied For
21	26				65-0565263	Not Applicable \$8.75 Additional			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Add e Requ	
22		27			***************************************				
City & State City & State					6. Election Campaign Financing Trust Fund Contribution		<b>00</b> M: ded to I		
23	Country	28	Cou	intry				ied to t	1 663
Zip		Zip	30	, iti y		<ol> <li>This corporation owes the current year Inta Personal Property Tax.</li> </ol>	Yes	7	<b>K</b> No ∣
24	25   me and Address of Current	29 Registered Agent		Г		10. Name and Address of New Registered			
9, Na	ine and Address of Current	Kagistereu Agent		81	Name				
APPLEBAUM, STANLEY D					O: A 1.1	(DO Double the in Manager Help)			
86 HAMPSH				82	Street Addre	ss (P.O. Box Number is Not Acceptable)			
BOYNTON E	BEACH FL 33436			83					
				-			los I	Zip Co	udo.
				84	City	FL	85	LIP CO	nue
Affice or registeres	ovisions of Sections 607.0502 I agent, or both, in the State o r with, and accept the obligati	f Florida. Such change wa	s authorized	ועםו	ine corporatio	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoin	changing atment a	g its re is regis	egistøred stered
SIGNATURE		title if applicable (All	OTE: Pacintored	( Anno	t signature required	when reinstating) DATE			
12.	typed or printed name of registered agent OFFICERS AND		13.	, Again	agratore required	ADDITIONS/CHANGES TO OFFICERS AN	D DIRE	CTOR	S IN 12
TITLE D	011102107112	☐ DELETE		π.E			Chai		☐ Addition
·-	ER, MARTIN S		1.2 N	AME	ļ				
l l	N.W. 23RD TERR.		1.3 \$	TREET	ADDRESS				Ì
	RATON FL 33496		1.4 CI	ITY-ST	-ZIP				
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STREET ADDRESS					ADORESS				
CITY-ST-ZIP			6.4 C	ITY-SI	I-ZIP				

14. I 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; 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.