

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000015119

1. Entity Name  
CORFAB OF FLORIDA, INC.



Principal Place of Business  
11361 TRADE COURT  
JACKSONVILLE, FL 32256

Mailing Address  
11361 TRADE COURT  
JACKSONVILLE, FL 32256



04302007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3299554  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

WIENBARG, FRED W JR.  
1964 COOK ROAD  
FERNANDINA BEACH, FL 32034

**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  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME WIENBARG, FRED W JR.  
STREET ADDRESS 1964 COOK ROAD  
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE ST  
NAME WIENBARG, PATRICIA  
STREET ADDRESS 1964 COOK ROAD  
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE VP  
NAME WIENBARG, KEITH H  
STREET ADDRESS 12680 GATHERING OAKS  
CITY-ST-ZIP JACKSONVILLE, FL 32258

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Fred Wienbarg Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Fred Wienbarg Jr. 4-30-07*

Date

Daytime Phone