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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1997 8:00am

Secretary of State

30S)

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000057127 (9)

DAVID GOLDWEITZ, P.A.

| | MAPPILLIP, 1 W. | | | | |
|---|--|---|---|---|--|
| Principal Plac | e of Business | Mailing Address | | | Bason missi roddi itora sidik falls sans |
| 12360 6W 82 AVE MIAMI FL 33156 | | 12380 SW 82 AVE MIAMI FL 33156-5223 | | | |
| i | | | | 3. Date Incorporated or Qualified 07/24/1995 | 3a. Date of Last Report 05/01/1996 |
| 2. Principal Place of Business 21 | | 2a. Mailing Address 26 | | 4. FET Number 65-0604937 | Applied For Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apl. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip 24 | Country 25 | Ζφ 29 | Country 30 | | Yes No |
| | 9. Name and Address of Curri | ent Registered Agent | | 10. Name and Address of New Reg | stered Agent |
| WEI | SS, JOSEPH G JR. | | 81 Name | | |
| 1031 N MIAMI BEACH BLVD N MIAMI BEACH FL 33162 | | 82 Street Add | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| | | | 83 | | |
| | | | 84 City | | or Zin Codo |
| | | | D4 City | | FL 85 Zip Code |
| agent. I a SIGNATURE | m familiar with, and accept the obli | gations of, Section 607.0505, f | lorida Statutes. | poration submits this statement for the pr tion's board of directors. I hereby accep | |
| | Signature, typed or printed name of registered a | gent and tild if applicable (NO NO DIRECTORS | It Registered Agent signature requ | ired when reliistating) ADDITIONS/CHANGES TO OFFICE | DO AND DIDECTORS IN 49 |
| 12. | PD | DELFTE | 1.1 MILE | ADDITIONS/OFFICES TO OFFICE | Change Addition |
| NAME | GOLDWEITZ, DAVID | | 1,2 NAME | | Criangs Indunion |
| STREET ADDRESS | 12380 SW 82 AVE | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL 33156 | | 1.4 CHY- S1- ZIP | | |
| TITLE | | DELFTE | 2 1 TITLE | | Charige Addition |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | į |
| CITY-ST-ZIP | | | 2. 4 CITY- \$1 - ZIP | | |
| TITLE | | DETETE | 31 THLE | | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | p. | | 3.3 STREET ADDRESS | | í |
| CITY-ST-ZIP | | | 3.4. CHY+ST-7IP | | |
| TITLE | | DELETE | 4.1 TITLE | | Change Addition |
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| STREET ADDRESS | | | 4.3 STREET ADDRESS . | | |
| CITY-ST-ZIP | | | 4.4 CITY - ST- ZIP | | |
| TITLE | | L_I DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | —————————————————————————————————————— | 5.4 CITY - ST - ZIP | | |
| TITLE | | ☐ DEFETE | 6.1 TITLE | | Change Addition |
| NAME | | | 6.2 NAML | | |
| STREET ADDRESS | | | 63 STREET ADDRESS | | |

14. I do hereby certify that the information supplied with this filing closs 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 suppliemental 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 reference of the corporation of the corpo