

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 16, 2002 8:00 am**  
**Secretary of State**

05-16-2002 90053 027 \*\*\*150.00

DOCUMENT # P95000065120

1. Entity Name

Dweck Enterprises, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

5386 SW 33 Way

3. Mailing Address

5386 SW 33 Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Ft. Lauderdale, FL

City & State  
Ft. Lauderdale, FL

4. FEI Number  
65-0604215

Applied For  
Not Applicable

Zip  
33312

Country  
US

Zip  
33312

Country  
US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
Eddie Dweck

Street Address (P.O. Box Number is Not Acceptable)

5386 SW 33 Way

City  
Ft. Lauderdale

FL

Zip Code  
33312

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.

SIGNATURE *Eddie Dweck*

Signature, typed or printed name of registered agent and title if applicable.

*Eddie Dweck Pres.*

(NOTE: Registered Agent signature required when reinstating)

*4-30-02*

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*P  
Eddie Dweck  
5386 SW 33 Way  
Ft. Lauderdale, FL 33312*

TITLE  
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CITY-ST-ZIP

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IN THIS SPACE**

13. 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 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Eddie Dweck*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Eddie Dweck*

*4-30-02*

Date

*305-343-7524*

Daytime Phone #

CR2E034B (12/01)