

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000025510

1. Entity Name-
STATESIDE CAPITAL CORP.



Principal Place of Business

**75 N.E. 6TH AVENUE
SUITE 103
DELRAY BEACH, FL 33483 US**

Mailing Address

**75 N.E. 6TH AVENUE
SUITE 103
DELRAY BEACH, FL 33483 US**



04122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0657210	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WEINSTEIN, NORMAN S
75 N.E. 6TH AVENUE
DELRAY BEACH, FL 33483**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

**000000522250
05/03/06-80022-017 150.00**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WEINSTEIN, NORMAN S
STREET ADDRESS	75 N.E. 6TH AVENUE #103
CITY-ST-ZIP	DELRAY BEACH, FL 33483

TITLE	D
NAME	WEINSTEIN, SUSAN
STREET ADDRESS	75 N.E. 6TH AVENUE #103
CITY-ST-ZIP	DELRAY BEACH, FL 33483

TITLE	
NAME	
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STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 if 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 the corporation or the receiver, trustee empowered to execute this report as required by Chapter 637, Florida Statutes; and that my name appears on the report, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Norman S. Weinstein, Pres. 4,**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date