## े FALE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT 1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #' P9600029225 (5)

WEIN INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

**FILED** Jun 18 1998 8:00am Secretary of State



6580 PONDAPI BOCA RATON		6580 PONDAPPLE RO/ BOCA RATON FL 3343			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  03/28/1996	
2. Principal Place of Business 21		2a. Mailing Address 26			4. FEI Number APPLIED FOR 65-0840929 Applied F	icable
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees	
Zip 24	Country 25	7ip <b>29</b>	Counti	у	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	9
	9. Name and Address of Curren	it Registered Agent		1 1	10. Name and Address of New Registered Agent	
	IN, HUBERT		8	1 Name		
	O <b>PO</b> NDAPPLE ROAD C <b>A R</b> ATON FL 33433		8:		ddress (P.O. Box Number is Not Acceptable)	
			83	ļ		
			B4	City	FL 85 Zip Code	
12.	Signature, typied or printed rapins of registras discrete OFFICERS AN	D DIRECTORS	13.		equired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0	DELETE	1.1 TITLE		Change A	ddilion
NAME	<b>WE</b> IN, HUBERT		1.2 NAME			
STREET ADDRESS	6580 PONDAPPLE ROAD			T ADDRESS		
CITY-ST-ZIP TITLE	BOCA RATON FL 33433	DELETE	1.4 CITY-	ST-ZIP	☐ Change ☐ Ar	ddition
NAME		the petric	2 2 NAME		ONNING AN	20.001
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			2. 4 CITY	- ST - ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ A	ddition
NAME OFFICE APPROACE			3.2 NAME	1		
STREET ADDRESS CITY-ST-ZIP			3.3 STREE 3.4. CITY-	T ADDRESS		
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STREET ADDRESS			4.3 STREE	T ADDRESS		
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NAME			6.2 NAME		3000025660 <del>9</del> 3 -06/19/98011010 <b>3</b> 0	
STREET ADDRESS			63 STAFE	T ADDRESS		18
CITY-ST-ZIP			64 CHTY -	SI - ZIP	***150.00	-

14. Thereby certify that the information supplied with this filling 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered of 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.