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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90004 043 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600036907

HOWARD WEINER, P.A.					
				4 (00) (00) (10 10) (10 10) (10 10) (10 10) (10 10)	######################################
Principal Place of Business Mailing Address				t concent ton third first mostly month motify of	1888 11168 MISIN (MIL) BULII (NDI (NDI
3850 NW 99 AVE 3850 NW 99 AVE CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065					
	-	,		DO NOT WRITE IN TH	IIS SPACE
				3. Date Incorporated or Qualifed 04/29/1996	
2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
21 26				65-0679462	Not Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ate	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25 .		30	Personal Property Tax.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
WEINER, HOWARD					
3850 NW 99 AVE			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	<u> </u>
CORAL SPRINGS FL 33065				eth yes a market	the committee of the second second
	THE OF THINGS I'E GOOD	•	83		20. 14 A. 智慧器
Jan Grand San			84 City		85 Zip Code
11. Fursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
11. Fursuant to the provisions of Sections 07.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am together with article of Section 607.0505, Florida Statutes.					
SIGNATURE VIEW OF THE STATE OF					
`	Signature, typed or printed name of registered agent a		Registered Agent signature required	when reinstating) DATE	2 4
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D HOWARD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WEINER, HOWARD		1.2 NAME	•	• •
STREET ADDRESS			1.3 STREET ADDRESS	• • •	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	☐ DELETE	1.4 CITY-ST-ZIP		
TITLE		☐ DETEIE	2.1 TITLE	** * *	☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
Crty-St-ZIP		DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change C Address
NAME TO A		, DELETE	·	•	☐ Change ☐ Addition
STREET ADDRESS	A PARTY .		3.2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS		M1000円で121円(1
TITLE		☐ DELETE	3.4. C/TY-ST-ZIP 4.1 TITLE	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change D Addition
			4. 2 NAME		Change CAddition
NAME STREET ADDRESS	1. S.	***	4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		J
TITLE		☐ 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	र क्षेत्रमध्ये राख्या । इं	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	(2) 44、44、44、44、44、44、44、44、44、44、44、44、44、		6.2 NAME	•	C ourside Literation

14. I hereby certify that the information indicated on this annual record officer or director of the color block 12 or Block 13 if change not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information state and that my signature shall have the same legal effect as if made under oath; that I am an impo

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #