## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P96000067279**

1. Entity Name
WESTON GROUP ENTERPRISES, INC.



Principal Place of Business

180 ROYAL PALM WAY, STE. 201 PALM BEACH, FL 33480

Mailing Address

180 ROYAL PALM WAY SUITE 201 PALM BEACH, FL 33-4800

## FILED May 04, 2004 8:00 am Secretary of State

05-04-2004 90127 050 \*\*\*150.00

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04282004	No Chg-P	CR2E034 (10/	03)

4. FEI Number 65-0692028 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TARONE, THEODORE T 180 ROYAL PALM WAY SUITE 201 PALM BEACH, FL 33480 DO NOT WRITE IN THIS SPACE

SUITE 201 PALM BEA	ACH, FL 33480			IN	THIS SPACE	
	named entity submits this statement for the p ions of registered agent.	urpose of changing its registere	d office or re	gistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title to	f applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		_
10.	. OFFICERS AND DIREC	CTORS				
TITLE	PDVT					ويۇ ئا
NAME	CONNELLY, JAMES					,
STREET ADDRESS	180 ROYAL PALM WAY - SUITE 201		12 700			او: او:
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Theodore Tarine Assit Ser

April 29 2003