

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90104 049 ***150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000033020			
1. Entity Name WESTON WAREHOUSING, INC.			
Principal Place of Business 1166 W NEWPORT CENTER DR 118 DEERFIELD BEACH FL 33442 US		Mailing Address 1166 W NEWPORT CENTER DR 118 DEERFIELD BEACH FL 33442-7739 US	
2. Principal Place of Business 1096 E. Newport Center Dr.		3. Mailing Address 1096 E. Newport Center Dr.	
Suite, Apt. #, etc. 100		Suite, Apt. #, etc. 100	
City & State Deerfield Beach FL		City & State Deerfield Beach FL	
Zip 33442	Country USA	Zip 33442	Country USA

4. FEI Number 65-0798035	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 BAYNE, SHAWN 200 E. BROWARD BLVD., STE. 1900 FT. LAUDERDALE FL 33301	7. Name and Address of New Registered Agent Name Butters, Malcolm Street Address (P.O. Box Number is Not Acceptable) 1096 E. Newport Center Drive, #100 City Deerfield Beach FL Zip Code 33442
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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 _____ DATE **3/17/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BUTTERS, MALCOLM		NAME BUTTERS, MALCOLM	
STREET ADDRESS 1166 WEST NEWPORT CTR DR		STREET ADDRESS 1096 E. Newport Center Drive, #100	
CITY-ST-ZIP DEERFIELD BCH FL 33442		CITY-ST-ZIP Deerfield Beach, FL 33442	
TITLE VP	<input type="checkbox"/> Delete	TITLE VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BUTTERS, MARK		NAME BUTTERS, MARK	
STREET ADDRESS 1166 W NEWPORT CTR DR, STE 118		STREET ADDRESS 1096 E. Newport Center Drive, #100	
CITY-ST-ZIP DEERFIELD BCH FL 33446		CITY-ST-ZIP Deerfield Beach, FL 33442	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ DATE **3/17/00** DAYTIME PHONE # **954-570-8111**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR