
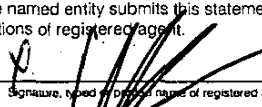



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90071 029 ***150.00

DOCUMENT # P97000089170					
1. Entity Name WEISBEIN & ASSOCIATES, INC.					
Principal Place of Business 7211 SW 62 AVE 120 CORAL GABLES, FL 33143			Mailing Address 7211 SW 62 AVE 120 CORAL GABLES, FL 33143		
2. Principal Place of Business C/O C.P.MOTION 6885 SW 58 PLACE SOUTH MIAMI, FL 33143			3. Mailing Address C/O C.P.MOTION 6885 SW 58 PLACE SOUTH MIAMI, FL 33143		
Zip		Country		4. FEI Number 65-0788716	
				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 CORPDIRECT AGENTS, INC 103 NORTH MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Raymond Weisbein C.P.MOTION 6885 SW 58 PLACE SOUTH MIAMI, FL 33143		
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  DATE 1/2/05					
(NOTE: Registered Agent signature required when reinstating)					
FILE NOW! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEISBEIN, RAYMOND G 7211 SW 62ND AVE STE 120 CORAL GABLES, FL 33143	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6885 SW 58 PLACE SOUTH MIAMI, FL 33143	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WEISBEIN, SELMA S 7211 SW 62ND AVE STE 120 CORAL GABLES, FL 33143	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6885 SW 58 PLACE SOUTH MIAMI, FL 33143	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 			Date 1/2/05 Daytime Phone # 305-668-7858		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Raymond Weisbein, Pres.					