

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 90719 017 ***150.00

DOCUMENT # P99000044621

1. Entity Name

WEINSTEIN'S SPECIALTY FOODS, INC.

Principal Place of Business

**10281 WEST SAMPLE ROAD
 CORAL SPRINGS FL 33065**

Mailing Address

**C/O GUBER AND ASSOCIATES, P.A.
 1650 SOUTHEAST 17TH STREET, SUITE 301
 FORT LAUDERDALE FL 33316-1735**

2. Principal Place of Business

SAMPLE

3. Mailing Address

GUBER

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0925595

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

WEINSTEIN, DAVID

~~**1412 NORTHWEST 93RD TERRACE
 CORAL SPRINGS FL 33071-6036**~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1278 NORTHWEST 85TH TERRACE

City

CORAL SPRINGS

FL

Zip Code

33071-6734

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **PSD**
 STREET ADDRESS **WEINSTEIN, NORMA**
 CITY-ST-ZIP **1278 NW 85TH TERRACE
 CORAL SPRINGS FL 33071**

TITLE ☐ Delete
 NAME **VPTD**
 STREET ADDRESS **WEINSTEIN, DAVID M.**
 CITY-ST-ZIP **1278 NW 85TH TERRACE
 CORAL SPRINGS FL 33071**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **NORTHWEST**
 CITY-ST-ZIP **33071-6734**

TITLE ☒ Change ☐ Addition
 NAME **WEINSTEIN, DAVID M.**
 STREET ADDRESS **NORTHWEST**
 CITY-ST-ZIP **33071-6734**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-12-02 954-522-2222

Date

Daytime Phone #

CR2E034 (9/01)