


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 8:00 am**  
**Secretary of State**

04-24-2008 90102 037 \*\*\*150.00

**DOCUMENT # P99000082581**

1. Entity Name  
**WINVEST CORPORATION**



Principal Place of Business <b>2801 N.W. 3RD AVE.          MIAMI, FL 33127</b>	Mailing Address <b>2801 N.W. 3RD AVE.          MIAMI, FL 33127</b>
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**DO NOT WRITE IN THIS SPACE**



01092008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0963516</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WECK, DAVID  
 2801 NW 3 AVENUE  
 MIAMI, FL 33127**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE <b>P</b>	<b>WECK, DAVID</b>
NAME	<b>2801 N.W. 3RD AVE.</b>
STREET ADDRESS	<b>MIAMI, FL 33127</b>
CITY-ST- ZIP	
TITLE <b>S</b>	<b>WECK, ELENA</b>
NAME	<b>2801 NW 3 AVENUE</b>
STREET ADDRESS	<b>MIAMI, FL 33127</b>
CITY-ST- ZIP	
TITLE <b>S</b>	<b>BERENSON, DIANA</b>
NAME	<b>2801 NW 3 AVE</b>
STREET ADDRESS	<b>MIAMI FL 33127</b>
CITY-ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST- ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *David Weck*, PRES Date: 4/1/08 Daytime Phone #: (305) 5730163