FILE NOW: FILING FEE AFTER MAY 1ST IS \$			0.00	o.oo FILED	
PROFIT CORPORATIO	N CONTRACTOR	FLORIDA DEPART		Apr 22 19	998 8:00am
ANNUAL REPO	P388864 . 1.071	Sandra B. Secretary			ry of State
1998		DIVISION OF CO	TIONS	Scorcia	y of State
DOCUMENT : 1. Corporation Name ROBIN WEINBER	•	(5)			
Principal Place of Business 2999 NE 191ST ST		Mailing Address 2760 N E 55 STREET		e sanitata til didit atbie Bitt itild i	ial arair bibis bibil elel) al£it 160ti 180t
STE 607 AVENTURA FL 33308 US		SUITE 208D FT LAUDERDALE FL 33308 US		DO NOT WRIT  3. Date Incorporated or Qualified	E IN THIS SPACE
2. Principal Place of Busine	155	2a. Mailing Address		04/10/1991 4. FEI Number	
21		26		65-0259599	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	10 To	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Ontry	8. This corporation owes or has pa	aid the current year Intangible
24   [2 9. Name s	nd Address of Current	29     3 Registered Agent	00	Personal Property Tax due June 10. Name and Address of New Re	30. Yes No
WEINBERGER, 2760 NE 55 ST			81 Name		
SUITE 208-D					
ft lauderdai	LE FL 33308		83		
			84 City		FL 85 Zip Code
office or registered age	int, or both, in the State of	and 607.1508, Florida Statutes Florida. Such change was au ons of, Section 607.0505, Flori	IUIONA LI DY IND CORPORE	poration submits this statement for the pation's board of directors. I hereby acce	ourpose of changing its registered pt the appointment as registered
SIGNATURE					
12.	OFFICERS AND	DIRL CTORS	1:	red when registating) ADDITIONS/CHANGES TO OFFICE	DERS AND DIRECTORS IN 12
NAME WEINBER	RGER, ROBIN	T DETELE	1.1 LE 1.2 ME		Change Addition
STREET ADDRESS 2760 NE	55 ST ERDALE FL		1.3 REET ADDRESS		
CITY-ST-ZIP FI LAUD	ENDALE FL	DELFTE	1.4 IY-ST-ZIP 21 ILE		Change Addition
NAME			2.2 AME		•
STREET ADORESS CITY-SI-ZIP			2.3 TIRLET ADDRESS 2. 4 DITY-ST-ZIP		
TIFLE		DETETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CHY-ST-ZIP THLE		☐ DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		Steel	4. 2 NAME		Clande (1) vanidati
STREET ADDRESS			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CITY-S)-ZIP 5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE NAME		☐ DITETE	6.1 TITLE E 6.2 NAME		Change Addition
STREET ADDRESS			6.3 \$TREET ADDRESS		
CITY ST-ZIP   14. I hereby certify that the	information supplied with	this filing does not qualify for	64 DTY-ST-ZIP the exemption stated in	Section 119.07(3)(i), Florida Statutes 1	further certify that the information
indicated on this annua officer or director of the	il report or supplemental (	initual report is true and accur or or trustee empowered to ex ment with an address.	rate and that my signatu recute this report as req	re shall have the same legal effect as if uired by Chapter 607, Ftorida Statutes; ;	made under oath; that I am an and that my name appears in
SIGNATURE:	Wil Neuber	aw Robi	n Werbego	4/15/18 3	059315751