07-15-1999 90007 047 ***150.00

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

Mailing Address

DIVISION OF CORPORATIONS

DOCUMENT #

ROBIN WEINBERGER, INC.

2999 NE 191S STE 607 AVENTURA FL US		2760 N E 55 STREET SUITE 208D FT LAUDERDALE FL 33308 US		DO NOT WRITE IN TO 3. Date incorporated or Qualified 04/10/1991	HIS SPACE
2. Principal P	ace of Business	2a. Mailing Address	_ 1	4. FEI Number	Applied For
21		28 2999 NE 191	ST.	65-0259599	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt, #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State 28 Q V W G		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip C	ountry	8. This corporation owes the current year	
24	25	29 2,308 30	DADE	Intangible Personal Property.	Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Register	ed Agent
	-		81 Name		
WEINBERGER, ROBIN 2760 NE 55 ST			82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 208-D			83		
FT	LAUDERDALE FL 33308				1-1-5-5-4
			84 City	F	85 Zip Code
agent. I a	am familiar with, and accept the oblig- Signature, typed or printed name of registered age	ations of, section 607.0505, Florida S	tatutes. gistered Agent signature re-		E
12.	OFFICERS AN	ND DIRECTORS 1	3.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE 1.	TITLE		Change Addition
NAME	WEINBERGER, ROBIN	1.	2 NAME		
STREET ADDRESS	2760 NE 55 ST	1.3	S STREET ADDRESS		
CITY-ST-ZIP	ft lauderdale fl	1.	4 CITY-ST-ZIP		
TITLE		DELETE 2.	1 TITLE		Change Addition
NAME			2 NAME		
STREET ADDRESS		2.	STREET ADDRESS		
CITY-ST-ZIP		2.	4 CITY-ST-ZIP		
TITLE		DELETE 3.	1 TITLE		Change Addition
NAME	1		2 NAME		
STREET ADDRESS		3.	STREET ADDRESS		
CITY-ST-ZIP		3.	4 CITY-ST-ZIP		
TITLE		DELETE 4.	1 TITLE		Change Addition
NAME			2 NAME		,
STREET ADDRESS		4.	STREET ADDRESS		
CITY-ST-ZIP			4 CITY-ST-ZIP		
TITLE			1 TITLE		Change Addition
NAME			NAME		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

__ DELETE

Change Addition

#**\$**44632 588763-9007 -47

ROBIN E. WEINBERGER, L.C.S.W.

Concorde Center II 2999 N.E. 191 Street Suite 703 Aventura, Florida 33180 (305) 931-5151

7/7/99

To whom it may concern,

This letter is to Notify you that I did Not recieve The original or 1st Notice For the 1999 amust report filing. I just reciews the 200 Notice Lody and contactor the Oluvian of Corporations who told me to write this letter Notify you that the 15 Notice was Not recieve.

Sweety, Robe Werberger Lun