

**2009 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P06000027979

1. Entity Name
JEG & SONS INC.



Principal Place of Business
20262 NE 15TH COURT
MIAMI, FL 33179 US

Mailing Address
20262 NE 15TH COURT
MIAMI, FL 33179

FILED

09 JAN 13 AM 7:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01072009 No Chg-P CR2E034 (11/08)

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4. FEI Number
20-4395157

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DERHY FINANCIAL SERVICES LLC
99 NW 183RD ST
138
MIAMI, FL 33169

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2009 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	NASH, ELI
STREET ADDRESS	20262 NE 15TH COURT
CITY-STATE-ZIP	MIAMI, FL 33179
TITLE	SEC
NAME	WEINGARTEN, JOSEPH
STREET ADDRESS	20262 NE 15TH COURT
CITY-STATE-ZIP	MIAMI, FL 33179
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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IN THIS SPACE**

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JOSEPH WEINGARTEN 1/7/2009 305-654-7555