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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

S33 A DINE HIGHWAY FT LAUDEROALE FL 333494  200 E. COMMERCIAL BLUD. C/O THOEOR LERRER FT. LAUDEROALE FL 33344  4. FEI Number  2. Principal Place of Business 2. Mailling Address 2. Sutte, Apt. 6, etc. 2. Principal Place of Business 2. Mailling Address 3. Sutte, Apt. 6, etc. 3	NORTHRIDGE PROFESSIONAL CONDOMINIUM ASSOCIATION, INC.							
FT LAUDERDALE FL 333444 S. CO TACEDOR LEHRER FT. LAUDERDALE FL 33344 FT. LAUDERDALE FL 33344 S. CONTINUED TO COUNTY	Principal Place of Business Mailing Address						1	
2. Principal Place of Business   2a. Mailing Address   5c. Certificate of Status Desired   \$8.75 Additional Fee Regulated   \$21	FT LAUDERDALE FL 33334-3453 C/O THOEDOR LEHRER			),			05/11/1982         Applied For           4. FEI Number         Applied For	
Sulle, Apt. #, etc.   State   St. 40 May Be Added to Fees   Ad	2. Principal F	Place of Business	2a. Mailing Address				— ¢0.75	
27		# oto					Fee Required	
City & State	_	, w, etc.	<del></del>					
Zip		te						
28			28					
9. Name and Address of Current Registered Agent  THEODOR LEHRER, M.D. 2100 E. COMMERCIAL BLVD. FT LAUDERDALE FL 33308  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  City FL  85  City FL  85  Zip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent. I am familiar with, and cacept the obligations of, Section 917,6503, Florids Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent. I am familiar with, and cacept the obligations of, Section 917,6503, Florids Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent. In an familiar with, and only privide agent and of the corporation's board of directors. Thereby accept the appointment as registered agent. In an familiar with, and only privide and of registered agent. In a familiar with, and of registered agent and size if applicable.  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  1.2 NAME  STREET ADDRESS  2100E COMMERCIAL BLVD  1.2 STREET ADDRESS  2100E COMMERCIAL BLVD  1.3 STREET ADDRESS  2100E COMMERCIAL BLVD  1.4 CITY-ST-ZIP  TITLE  1.4 CITY-ST-ZIP  TITLE  1.4 CITY-ST-ZIP  TITLE  1.5 Change Addition  2.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  1.4 CITY-ST-ZIP  Change Addition  2.8 NAME  3.4 STREET ADDRESS  CITY-ST-ZIP  TITLE  1.4 CITY-ST-ZIP  TITLE  1.5 Change Addition  4.4 TITLE  1.5 Change Addition  4.4 TITLE  1.5 Change Addition  4.5 STREET ADDRESS  CITY-ST-ZIP  TITLE  1.5 Change Addition  4.5 STREET ADDRESS  CITY-ST-ZIP  TITLE  1.5 Change Addition  4.5 STREET ADDRESS  CITY-ST-ZIP  TITLE  1.5 T	<b>⊢</b> .	<u> </u>	<b>⊢</b> , ⊢	_	intry		8. This corporation owes or has paid the current year Intangible	
THEODOR LEHRER, M.D. 2100 E. COMMERCIAL BLVD. FT LAUDERDALE FL 33308  84 City  FL 85 Zip Code  111- Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, are facilitated with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TO  Change  Addition  Addition  DELETE  1.1 TITLE  MD  CHERER, THEODOR  STREET ADDRESS  CITY-S1-ZP  FT LAUDERDALE, FL  DELETE  3.1 STREET ADDRESS  CITY-S1-ZP  OAKLAND PARK, FL  Change  Addition  AMME  STREET ADDRESS  CITY-S1-ZP  TITLE  SD  CHERTE  ADDRESS  CITY-S1-ZP  TITLE  SD  CHERTER  ADDRESS  CITY-S1-ZP  TITLE  CHERTER  ADDRESS  ADDITIONS/CHANGES OF CHARGING OF CHERTORIS IN TITLE  CHERTER  AD	24			30				
THEODOR LEHRER, M.D. 2100 E. COMMERCIAL BLVD. FT LAUDERDALE FL 33308  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  11- Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and for the purpose of changing its registered agent and agent 1 am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and acceptable of the purpose of changing its registered agent and familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In an familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In an familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In an familiar with, and acceptable agent and acceptable agent and acceptable agent agent and acceptable agent and acceptable agent and acceptable agent agent and acceptable agent agent acceptable agent agent agent acceptable agent agent acceptable agent agent acceptable acceptab		3. Name and Address of Correct	negistered Agent		81 1	Vame.	10. Name and Address of New Registered Agent	
2100 E. COMMERCIAL BLVD. FT LAUDERDALE FL 33308  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a minister with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  TD  DELETE  1.1 TITLE  DELETE  1.1 AGITY-ST-ZIP  TITLE  SO  OAKLAND PARK, FL  DELETE  3.1 TITLE  SOB  STREET ADDRESS  STREET	THEOD	THEODOR LEHDER M.D.						
FT LAUDERDALE FL 33308    84   City   FL   85   Zip Code					82 3	Street Addre	ss (P.O. Box Number is Not Acceptable)	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE					83			
11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617 0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  NAME  STREET ADDRESS  2100E COMMERCIAL BLVD  TASLIMI, KAMAL  22 NAME  STREET ADDRESS  5133 N DIXIE HWY  23 STREET ADDRESS  5134 N DELETE  TITLE  NAME  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Addition  NAME  TASLIMI, KAMAL  22 NAME  TASLIMI, KAMAL  22 NAME  STREET ADDRESS  5333 N DIXIE HWY  OAKLAND PARK, FL  TITLE  SD  COOPERSMITH, EDWARD  STREET ADDRESS  COOPERSMITH, EDWARD  STREET ADDRESS  OAKLAND PARK FL  DELETE  1.1 TITLE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  Addition  Change Addition  Addition  AMME  ACTIVELY ST-ZIP  TITLE  OAKLAND PARK FL  DELETE  1.1 TITLE  Change Addition  Addition  AMME  A STREET ADDRESS  COOPERSMITH, EDWARD  STREET ADDRESS  CHANGE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  AND Change ADDITIONS/CHANGES CHANGES CHAN					84 (	City	95 7in Code	
SIGNATURE Signature, typed of printed name of registered agent and title II applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  TID  LEHRER, THEODOR  STREET ADDRESS  GITY-ST-ZIP  TITLE  MD  LAGITY-ST-ZIP  TITLE  SD  LAGITY-ST-ZIP  TITLE  LAGITY-ST-ZIP  TITLE  SD  LAGITY-ST-ZIP  TITLE  LAGITY-ST-Z								
Signature, typed or printed name of registered agent and title II applicable. (NOTE: Registered Agent signature required when reinstating)								
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE TD	SIGNATURE .	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered	Agent s	ionature required	(when reinstaling)	
NAME   LEHRER, THEODOR   12 NAME	12.				•			
STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL  TITLE MD TASLIMI, KAMAL STREET ADDRESS CITY-ST-ZIP OAKLAND PARK, FL  STREET ADDRESS CITY-ST-ZIP  TITLE SD COOPERSMITH, EDWARD STREET ADDRESS CITY-ST-ZIP OAKLAND PARK FL  1.3 STREET ADDRESS 2.1 TITLE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP  TITLE COOPERSMITH, EDWARD 3.2 NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP ADRESS CITY-ST-ZIP ADDRESS	TITLE	, -	☐ DELETE	1.1 ТП	1.1 TOLE		Change Addition	
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NAME   COOPERSMITH, EDWARD   3.2 NAME   STREET ADDRESS   5333 N. DIXIE HIGHWAY   3.3 STREET ADDRESS   CITY-ST-ZIP   OAKLAND PARK FL   3.4. CITY-ST-ZIP   Change   Addition   A.2 NAME   A.2 NAME   A.2 NAME   A.3 STREET ADDRESS   A.4. CITY-ST-ZIP   A.5 STREET ADDRESS   A.5 STREET AD			DELETE				Change Addition	
STREET ADDRESS	NAME			<b>3</b>		İ	orange recinion	
TITLE         DELETE         4.1 TITLE	STREET ADDRESS	•		3.3 STREET ADDRESS		IRESS		
NAME         4.2 NAME           STREET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         5.2 NAME	CITY-ST-ZIP	OAKLAND PARK FL		3.4. CITY-ST-ZIP		iP .		
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VALUE 7112	1 1		☐ DEFFIE	B .			L_I Change L_ Addition	
STREET ADDRESS 5.3 STREET ADDRES						nece		

14. I hereby certify that the Information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

8.2 NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

DELETE

01-05.98

Change

\_\_\_ Addition

**FILED** 

Jan 21 1998 8:00am

Secretary of State