

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001549

FILED  
May 03, 2009  
Secretary of State

Entity Name: PEARLS FOUNDATION, INC.

## Current Principal Place of Business:

182 NW 75 TERRACE  
PLANTATION, FL 33324

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 120278  
FT. LAUDERDALE, FL 33312

## New Mailing Address:

FEI Number: 65-1084517      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

GEORGE, LISA M  
182 NW 75 TERRACE  
PLANTATION, FL 33317      US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GEORGE, LISA M  
Address: 182 NW 75 TERRACE  
City-St-Zip: PLANTATION, FL 33317

Title: VD ( ) Delete  
Name: PINKNEY, KHANDIA  
Address: 16204 NW 20TH ST  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD ( ) Delete  
Name: POINDEXTER, ANETRA  
Address: 921 NE 199TH STREET, #104  
City-St-Zip: MIAMI, FL 33179

Title: T ( ) Delete  
Name: BELL, LISA E  
Address: 7925 PLANTATION BLVD.  
City-St-Zip: MIRAMAR, FL 33023

Title: FSD ( ) Delete  
Name: GOODWIN, SHAROEN  
Address: 3460 NW 6 ST.  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: PARL (X) Delete  
Name: JONES, DANIELLE  
Address: 1940 NW152ND TERRACE  
City-St-Zip: OPA-LOCKA, FL 33054

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: ANDREWS, TASHIMBA  
Address: 1840 NW 172ND TERRACE  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA E. BELL

T

05/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date