

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19593

FILED  
Feb 04, 2005  
Secretary of State

**Entity Name:** ALVIN AND ANITA PERLMAN FOUNDATION, INC.

**Current Principal Place of Business:**

C/O HOWARD W. GORDON  
2035 NE 201 ST TERR.  
N. MIAMI BEACH, FL 33179

**New Principal Place of Business:**

1395 BRICKELL AVENUE  
14TH FLOOR  
MIAMI, FL 33131

**Current Mailing Address:**

C/O HOWARD W. GORDON  
2035 NE 201 ST TERR.  
N. MIAMI BEACH, FL 33179

**New Mailing Address:**

1395 BRICKELL AVENUE  
14TH FLOOR  
MIAMI, FL 33131

**FEI Number:** 59-2786807

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GORDON, HOWARD W.  
2035 NE 201ST TERR.  
N. MIAMI BEACH, FL 33179 US

**Name and Address of New Registered Agent:**

GORDON, HOWARD W ESQ  
1395 BRICKELL AVENUE  
14TH FLOOR  
MIAMI, FL 33131 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: HOWARD W. GORDON

02/04/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: GORDON, HOWARD W.,  
Address: 2035 NE 201ST TERR.  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: TD ( ) Delete  
Name: PERLMAN, ANITA  
Address: 2035 NE 201ST TERR.  
City-St-Zip: N. MIAMI BEACH, FL 33179

Title: TD ( ) Delete  
Name: PERLMAN, SHIRLEY,  
Address: 2035 NE 201ST TERR.  
City-St-Zip: N. MIAMI BEACH, FL 33179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: GORDON, HOWARD W  
Address: 1395 BRICKELL AVE., 14TH FLOOR  
City-St-Zip: MIAMI, FL 33131

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 for the exemption stated in Section 119.07(3)(i), 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: HOWARD W. GORDON

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02/04/2005

Electronic Signature of Signing Officer or Director

Date