

FILE NOW: FILING FEE IS \$61.25

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Mar 05 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. McArthur
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000002262 (1)

1. Corporation Name

ATHENIAN-PIRAEOTANS CULTURAL ASSOCIATION: PERICLES, INC.

Principal Place of Business

4700 MCKINLEY ST
HOLLYWOOD, FL, 33021

Mailing Address

4700 MCKINLEY ST.
HOLLYWOOD, FL, 33021



3. Date Incorporated or Qualified

04/25/1996

4. FEI Number

11-9464453

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FILINGS, INC.
3732 NW 16TH ST.
FT. LAUDERDALE FL 33311

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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 office or 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME CONSTADARAS, ZAFIRIS
STREET ADDRESS 899 W. PROSPECT ROAD
CITY-ST-ZIP OAKLAND PARK FL 33309
PRESIDENT

TITLE D ☒ DELETE
NAME STAVRINOS, NICHOLAS
STREET ADDRESS 899 W. PROSPECT ROAD
CITY-ST-ZIP OAKLAND PARK FL 33309
VICE PRESIDENT

TITLE S ☐ DELETE
NAME SOPHIA, NAKIS
STREET ADDRESS 899 W. PROSPECT ROAD
CITY-ST-ZIP OAKLAND PARK FL 33309
SECRETARY

TITLE T ☐ DELETE
NAME SASSON, JACK
STREET ADDRESS 9700 NW 18TH DR.
CITY-ST-ZIP PLANTATION FL 33322
TREASURER

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
JOHN IOANNOU
8821 S.W. 8TH ST.
PLANTATION, FL, 33324
☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
NAKIS DIMITRIOS
4700 MCKINLEY ST.
HOLLYWOOD, FL, 33021
☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
SOFIA NAKIS
4700 MCKINLEY ST.
HOLLYWOOD, FL, 33021
☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
JACK SASSON
9700 NW 18TH DR
PLANTATION FL 33322
☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

1-8-98 (REV) 98-1039

CR2E037 (10/97)