FILE NOW: FILING FEE IS $61.25

FILED
May 06, 1999 8:00 am
Secretary of State
05-06-1999 90054 049 ****61.25

0065296

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **722754**

1. Corporation Name

PEARL CONDOMINIUM ASSOCIATION, INC.

500487 - 90054 - 49

Principal Place of Business	Mailing Address
C/O CMS 5310 N SR 7 SUITE D FT. LAUDERDALE FL 33319 US	5310 N SR 7 SUITE D FORT LAUDERDALE FL 33319 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
21	26	02/23/1972
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number: 59-1535216 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

COOPERATIVE MANAGEMENT SERVICES
5310 NORTH STATE ROAD 7
SUITE D
FORT LAUDERDALE FL 33319

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	KATZ, S		1.2 NAME	FI
STREET ADDRESS	4151 NW 41 ST #108		1.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE LKS FL		1.4 CITY-ST-ZIP	
TITLE	S	☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ELSTON, LLOYD		2.2 NAME	FRANK WRSO
STREET ADDRESS	4151 NW 41ST STREET #107		2.3 STREET ADDRESS	4191 N.W. 41ST #211
CITY-ST-ZIP	LAUDERDALE LAKES FL 33313		2.4 CITY-ST-ZIP	LAUDERDALE LAKES FL 33319
TITLE	M	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	CAHMI, MORRIS		3.2 NAME	
STREET ADDRESS	4151 NW 41 STREET #419		3.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE LAKES FL		3.4. CITY-ST-ZIP	
TITLE	VP	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	FUHRMAN, AL		4. 2 NAME	
STREET ADDRESS	4191 NW 41ST ST #216		4.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE LKS FL		4.4 CITY-ST-ZIP	
TITLE	D	☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	CHIALO, ARTHUR		5.2 NAME	DEBBIE USHER
STREET ADDRESS	4151 NW 41ST STREET, #109		5.3 STREET ADDRESS	4191 N.W. 41ST #313
CITY-ST-ZIP	LAUDERDALE LKS FL 3319		5.4 CITY-ST-ZIP	LAUDERDALE LAKES FL 33319
TITLE	D	☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	ELCANESS, G		6.2 NAME	PEARL HANDERSON SECRETARY
STREET ADDRESS	4151 NW 41ST ST #408		6.3 STREET ADDRESS	4191 N.W. 41ST #217
CITY-ST-ZIP	LAUDERDALE LKS FL		6.4 CITY-ST-ZIP	LAUDERDALE LAKES FL 3339

CR2E037 (11/98)

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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Sylvia L Katz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #