FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

323 S.E. 1ST AVENUE

737903

(5)

THE HALLANDALE - PEMBROKE PARK CHAMBER OF COMMER CE, INC.

Mailing Address					
323 S.E. 1ST AVENUE	3. Date Incorporated or Qualified				
P.O. BOX 249	00/04/4077				

FILED

Mar 18 1998 8:00am

Secretary of State

P O BOX 249			02/01/1977				
HALLANDALE FL 33009 HALLANDALE FL 33009					4. FEI Number	Applied For	
US US				59-1717977	Not Applicable		
2. Principal P	Principal Place of Business 2a. Mailing Address				\$8.75 Additional		
21 28					5. Certificate of Status Desired	Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc.				6. Election Campaign Financing	\$5.00 May Be		
22 27		,		Trust Fund Contribution			
		City & State	tale		7. Is this nonprefit corporation a homeowners a		
23 Zip	Country		Zip Country		Yes CNo		
24 24	<u></u>	Zip	 	ry	8. This corporation owes or has paid the currer		
24	9. Name and Address of Currer	29]	30		Personal Property Tax due June 30. Yes 3d No 10. Name and Address of New Registered Agent		
	- Italia 2110 Mariota 01 001101	ii ttogistorou Agorii	8	1 Name	To round tild regulate or their flagistical Mg		
LIBBUTTO	OVARTINA I		Ľ				
	S, CYNTHIA J.		8	82 Street Address (P.O. Box Number is Not Acceptable)			
	1ST AVENUE		8	3			
. HALLANI	DALE FL 33309		Ĺ			<u> </u>	
			8	4 City	FL	85 Zip Code	
11. Pursuant	to the provisions of Sections 617 050	2 and 617 1508 Florida Statu	tes, the abo	ve-named		nanging its registered	
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized	by the corp	corporation submits this statement for the purpose of clooration's board of directors. I hereby accept the appoir	ntment as registered	
•	m ramiliar with, and accept the oblig-	alions of, Section 617.0503, F	ionda Statut	B8.			
SIGNATURE .	Signature, typied or printed name of registered age	on and title if applicable (NO	TE Registered A	gent signature	required when reinstating) DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12	
TITLE	PED	DELETE	1,5 TOTAL		p G	Change Addition	
NAME	SCHILLER, FRANCINE S		1.2 NAM				
STREET ADDRESS				ET ADDRESS	SCHILLER, FRANCINE S.		
CITY-ST-ZIP	HALLANDALE FL		1.4 CITY	-ST-ZIP			
TITLE	VPD X DELETE		2 1 TITLE		XPD	Change 🙀 Addition	
NAME	OSHINSKY, LEONARD			22 NAME 22 NAME 23 STREET ADDRESS Hellandele Bch. Blvd.			
STREET ADDRESS	S 1150 E. HALLANDALE BEACH BLVD			23 STREET ADDRESS Hallandale, F1. 33009			
CITY-ST-ZIP	HALLANADALE FL		2. 4 CITY	·ST-ZIP			
TITLE	P	PE DELETE	3.1 TITLE		VPD	Change Se Addition	
NAME	FORBES, CHUCK		3.2 NAM		Seth Ripple		
STREET ADDRESS	1250 E. HALLANDALE BEACH	BLVD	3.3 STRE	ET ADDRESS	1000 E. Hallandele Rob plus		
CITY-ST-ZIP	HALLANDALE FL		3.4. CITY		1000 E. Hallandals Bgh. Blvd	1 A CONTRACTOR	
TITLE	VPD	DELETE	4.1 TITLE		VPD L	Change Addition	
NAME	MARK GUNDERSON		4. 2 NAV		-Adam Von Romer		
STREET ADDRESS	901 S. FEDERAL HWY			ET ADDRESS	615 NW 210th St.		
CITY-ST-ZIP	HALLANDALE FL	Dorieté	4.4 CITY		Miami, Fl. 33169	Change 2 Addition	
TITLE	VPD	☐ DELETE	5.1 TITLE	i	rep ==	Privatinge (FT) vonglou	
NAME	SAVIFIE, JORDAN	1 May 4 400	5.2 NAM	L L	Jordan Sayfie		
STREET ADDRESS	1117 E. HALLANDALE BEACH	BLVD		ET ADDRESS	1117 E. Hallandale Bch. Blvd	•	
CITY-ST-ZIP	HALLANDALE FL	DELETE	5.4 CITY		Hallandale, Fl. 33009	Change Addition	
TITLE	S	f" nere (F	6.1 TITLE	1	L-	Towning Theory	
NAME	CYNTHIA J. HIBBITTS		6.2 NAM	1			
STREET ADDRESS	323 S.E. 1ST AVE.			ET ADDRESS			
CITY-ST-2IP	HALLANDALE FL		6.4 CITY	ST-ZIP			

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 supplymental 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 composition or high 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 charged, or unan attack mention and address.

SIGNATURE: