2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

05-01-2006 90530 009 ****61.25 -N05000002385

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DOCUMENT # N0500007385 1. Entity Name PEMBROKE PARK PLACE CONDOMINIUM ASSOCIATION, INC.								CRETAR LAHAS			
Principal Place of Business 2601 BISCAYNE BLVD. MIAMI, FL 33137			260	Mailing Address 2601 BISCAYNE BLVD. MIAMI, FL 33137			Ann a	 	IKIN BANI Ba ra (b		DIIP: F# 10 P)
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			<u>. </u>	04212006 C	hg-NP	CR2E0	37 (11/05)		
City & State		City & State				4. FZNNumber	3172	907	<u> </u>	oplied For or Applicable	
Zip		Country	Zi	Zip		intry	5. Certificate of S	latus Dosired		\$8.75 Add Fee Require	
	6. Name	and Address of Curr	ent Register	ed Agent			7. Name and Add	iress of New	Registered.	Agent	
ROUSSO, MARK E ESQ						Name					
18851 NE SUITE 900)					Street Address	s (P.O. Box Number is	NO ACCEPIA	Die)		
AVENTUR	CA, FL FL					City			FL	Zip Cod	8
	named entiti tions of regis	ty submits this statementered agent.	nt for the purp	cose of changing its r	registere	l ed office or regist	tered agent, or both, in	the State of		•	and accept
SIGNATURE .	Signature, typed	d or printed name of registered a	gent and title if ap	plicable. (NOTE:	Registered	d Agent signeture requi	ired when reinstating)		DATE		
SIGNATURE :	Filing Pe	d or present name of requested a one is \$61.25 May 1, 2006	igent and title if ap	9. Election Carn Trust Fund Co	paign Fi	inancing	\$5.00 May Be Added to Fees		DATE Make chec orida Depar		
	Filing Pe	e Is \$61.25		9. Election Cam Trust Fund Co	paign Fi		\$5.00 May Be Added to Fees	FI:	Make check orida Depar	tment of St	tate
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12. Thereby certify that the information supplied with this filing does not qualify for the examptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receives or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an adverss, with all other like empowered.

SIGNATURE: BIGNATURE AND