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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N9700001048

1. Corporation Name

PINE ISLAND/RIDGE PLAZA MERCHANTS' ASSOCIATION, INC.

Principal Place of Business

FT LAUDERDALE FL 33306

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

Cuite Ant # oto

26

% GUMBERG ASSET MANAGEMENT CORP. 3200 N. FEDERAL HIGHWAY

% GUMBERG ASSET MANAGEMENT CORP. 3200 N. FEDERAL HIGHWAY FT LAUDERDALE FL 33306

FILED Jul 14, 1999 8:00 am Secretary of State

07-14-1999 90017 006 ****30.62 07-14-1999 90017 005 ****30.63

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Applied For

Date Incorporated or Qualifed

02/20/1997

EEI Number

Suite, Apt.	#, etc.	Suite, Apr. #, etc.					1,444	1100 1 01	
22		27			65-0739385		Not	Applicable	
City & Stat	e	City & State		,	5. Certifcate of Status Desired		\$8.75 Ad Fee Red	1	
Zip	Country	Zip	Country		6. Election Campaign Financing		\$5.00	May Be	
24	25	29 30			Trust Fund Contribution		Added to		
2 -	9. Name and Address of Current	<u> </u>	' 		10. Name and Address of New	Registered /	Agent		
			81	Name				Ì	
A	IOUADO I			0	(C.O. Barris March and March March	·	·		
ALLEN, RICHARD L NATIONBANK TOWER AT INTERNATIONAL PLACE 100 S.E. 2ND STREET, 21ST FLOOR				82 Street Address (P.O. Box Number is Not Acceptable) 150 W. Flagler Street, Suite 2000					
				83					
				Museum Tower					
MIAMI FL 33131				City Miami		FĿ	85 Zip C 33 l	ode 30	
	to the provisions of Sections 617.0502	and 647 4500 Elected Statutos	the phays		poration submits this statement for the				
office or i	registered agent or both in the State of	Elorida, Such change was auth	onzed by	tne corporati	on's board of directors. I hereby acce	pt the appoin	ntment as reg	istered	
agent. I a	am familiar with, and accept the obligation	ns of, Section 617.0503, Florida	a Statutes.						
SIGNATURE						DATE			
- 46	Signature, typed or printed name of registered agent a		gistered Agent	signature require	d when reinstating) ADDITIONS/CHANGES TO OF		D DIRECTOR	RS IN 12	
12.	OFFICERS AND	DIRECTORS DELETE	1.1 TITLE	, , , r			Change	XXAddition	
TITLE	D	K) Detere		-					
NAME.	FOX, GLENN	•	1.2 NAME		Lieberman, Shelli		•		
STREET ADDRESS			1.3 STREET		3200 N. Federal High				
CITY-ST-ZIP	FT LAUDERDALE FL 33306		1.4 CITY-ST	-ZIP F	It. Lauderdale, FL	_33306_	W 201	Fil Addition	
πιε	D	☐ DELETE	2.1 TITLE	Ι,			∑ }Change	☐ Addition	
NAME	DRAPER, MARIANNE	•	2.2 NAME	1	Oziki, Marianne			;	
STREET ADDRESS	3200 N FEDERAL HWY		2.3 STREET	ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL 33306		2.4 CITY-S	T-ZiP					
TITLE	D.	☐ DELETE	3.1 TITLE	1			☐ Change	☐ Addition	
NAME	SIEGEL. DAVE		3.2 NAME	1					
STREET ADDRESS	3200 N. FEDERAL HIGHWAY		3.3 STREET	ADDRESS				Y	
CITY-ST-ZIP	FT LAUDERDALE FL 33306		3.4. CITY-S	T-ZIP					
TITLE		☐ DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAME				. ,		
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4,4 CFTY-ST	r-ZiP				}	
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition	
NAME	1		5.2 NAME					1	
STREET ADDRESS			5.3 STREET	ADDRESS				j	
	'		5.4 CITY+S	r-ZIP				1	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE				Change	Addition	
			6.2 NAME					_	
NAME			6.3 STREET	ADORESS					
STREET ADDRESS	<u>!</u>		ا کیکا ان درن						

6.4 CITY-ST-ZIP CITY-ST-ZIP 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: V

4/22/99

954-537-2700

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