

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000045304

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** MARK PERLMAN, P.A.

**Current Principal Place of Business:**

1820 E HALLANDALE BEACH BLVD  
HALLANDALE, FL 33009

**New Principal Place of Business:**

1820 E HALLANDALE BEACH BLVD  
HALLANDALE, FL 33009 US

**Current Mailing Address:**

1820 E HALLANDALE BEACH BLVD  
HALLANDALE, FL 33009

**New Mailing Address:**

1820 E HALLANDALE BEACH BLVD  
HALLANDALE, FL 33009 US

**FEI Number:** 65-0422749

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERLMAN, MARK  
% MARK PERLMAN PA  
1820 E HALLANDALE BEACH BLVD  
HALLANDALE, FL 33009 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: PERLMAN, MARK  
Address: 1820 E HALLANDALE BEACH BLVD  
City-St-Zip: HALLANDALE, FL 33009 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK PERLMAN

P

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date