

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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95 MAY -1 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Blumenthal
Secretary of State
Director, Division of Corporations

DOCUMENT # **P94000040141 (1)**

CLUB PEMBROKE ISLES, INC.

USE FOR WHITE ONLY (THIS SPACE)

1. Principal Place of Business 700 N.W. 107 AVE MIAMI FL 33172		2a. Mailing Address 700 N.W. 107 AVE MIAMI FL 33172		3. Date of Incorporation or Creation 05/27/1994	3a. Date of Last Report
2. Principal Place of Business 21	2a. Mailing Address 26	4. FET Number APPLIED FOR		Approved for Not Applicable	
22. Certificate of Status Desired 22	27. City & State 27	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. City & State 23	28. City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. City & State 24	29. City & State 29	30. Does corporation have an officer or director who is a resident of Florida? ☒ Yes ☐ No		Florida Statutes	

9. Name and Address of Current Registered Agent WATSKY, MORRIS J 700 N.W. 107TH AVE. MIAMI FL 33172		10. Name and Address of New Registered Agent	
		B1. Name	
		B2. Street Address (P.O. Box Number is Not Acceptable)	
		B3.	
		B4. City	FL
		B5. Zip Code	

11. Pursuant to the provisions of Sections 607.01(1), (2), and 607.15(1)(b), 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. Each 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 Sections 607.01(2), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME D MILLER, LEONARD 700 N.W. 107 AVE. MIAMI FL 33172		1. NAME 1. NAME 1. STREET ADDRESS 1. CITY & ZIP	☐ Change ☐ Addition
NAME D BOLOTIN, IRVING 700 N.W. 107 AVE. MIAMI FL 33172		2. NAME 2. NAME 2. STREET ADDRESS 2. CITY & ZIP	☐ Change ☐ Addition
NAME D COLE, ROBERT B 700 N.W. 107 AVE. MIAMI FL 33172		3. NAME 3. NAME 3. STREET ADDRESS 3. CITY & ZIP	☐ Change ☐ Addition
NAME D PEKOR, ALLAN J 700 N.W. 107 AVE. MIAMI FL 33172		4. NAME 4. NAME 4. STREET ADDRESS 4. CITY & ZIP	☐ Change ☐ Addition
NAME D MILLER, STUART A 700 N.W. 107 AVE. MIAMI FL 33172		5. NAME 5. NAME 5. STREET ADDRESS 5. CITY & ZIP	☐ Change ☐ Addition
NAME D AS Sierra, Kathleen E. 700 N.W. 107 Ave. Miami, FL 33172		6. NAME 6. NAME 6. STREET ADDRESS 6. CITY & ZIP	☐ Change ☒ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 199.02(1)(b), Florida Statutes. I further certify that the information provided in this annual report or supplemental, amended report or true and correct copy and that my signature shall have the same legal effect as if made in person. I am a resident of the State of Florida and the corporation or the individual officer or director who is a resident of the State of Florida. I am familiar with and accept the obligations of Sections 607.01(2), Florida Statutes, and that my duties as a registered agent or officer or director of the corporation are as stated in the filing.

SIGNATURE: *Kathleen E. Sierra* **Kathleen E. Sierra** 4/8-95 (305) 229-6400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR