## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra S. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P95000042641 (7)

PEARL PROPERTIES, INC.

**FILED** Apr 29 1997 8:00am Secretary of State



1 "	ce of Business	Mailing Address			<del> </del>				
1000 NORTH DIXIE HIGHWAY 1000 NORTH DIXIE HIGHWAY W PALM BEACH FL 33401 W PALM BEACH FL 33401-3332									
						3. Date Incorporated or Qualified 06/01/1995		ate of Last R 09/1996	leport
· ·	Place of Business	2a. Mailing Address				4. FEI Number	<u>'</u>		oplied For
Suite, Apl	# rate	Suite, Apt. #, etc.				59-3318021			ot Applicable
22	#, CIG.	27				5. Certificate of Status Desired			Additional equired
City & Star	te	City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added	May Be to Fees
Zip 24	Country 25	Z(p	30 Co.	untry		8. This corporation has liability for	- T		
[27]	9. Name and Address of Cu		150	Т		10. Name and Address of New Re			
PE/	ARL, WILLIAM D			B1	Name				,
100	0 NORTH DIXIE HIGHWAY		82 Street Addr			ess (P.O. Box Number is Not Acceptal	ole)	, <del></del>	
WI	PALM BEACH FL 33401			83			· · · · · · · · · · · · · · · · · · ·		
				B4	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Stat	utes, the a	pove-	named corpo	oration submits this statement for the p	ourpose of	changing i	ts registered
agent. Fa	registered agent, or both, in the 5 am familiar with, and accept the ol	cate of Florida. Such change was oligations of, Section 607.0505, I	authorize Florida Sta	tutes.	me corporation	on's board of directors. I hereby acce	pune app	omment as	registered
SIGNATURE							- DATE		<del></del>
12.	Signature, typed or printed name of registeres OFFICERS	AND DIRECTORS	JIE: Registere		signature require	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTOR	RS IN 12
TH'LE	D	DELETE	1.1 T					Change	Addition
NAME	PEARL, WILLIAM D		1.2 N	IAME					
STREET ADDRESS		•	1.9 S	TREET A	DDRESS				
City - S1 - ZiP	W PALM BEACH FL 33401	DELETE		ITY-ST	- ZIP	··········		Change	Addition
TITLE NAME		L) DELETE	2.1 Ti					L. Cliange	First Modition
STREET ADDRESS					DDRESS				
CITY-ST-ZIP				CITY-ST					
TITLE		DELETE	3.1 T					Change	Addition
NAME			3.2 N						
STREET ADDRESS					DDRESS				
CITY - ST- ZIP		DELETE	3.4. ( 4.1 T	CITY-ST	- ZIP			Change	Addition
NAME		HI DELLIE		NAME	1			ma comingo	L. rigginon
STREET ADDRESS			1		DDRESS				
CITY - S1 - ZIP			4.4 C	::TY-\$T-	- ZIP				
TITLE		DELETE	5.1 T	ITLE	Ţ			Change	Addition
NAME			52 N						
STREET ANDRESS					DDRESS				
CITY ST-ZIP		DELETE		ITY-ST	- 21P			Change	☐ Addition
TITLE		ריין הניננונ	6.1 T 6.2 N					F-1 CHRIBS	LL AQURION
NAME STREET ADDRESS	}		1		DDRESS				
CITY - ST - ZIP			1	HTY-ST					
C1111-011-21	I		0.40	,,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	- F-11				

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: