

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000071997

Entity Name: PERLA HOFFMAN, P.A.

FILED  
Apr 04, 2007  
Secretary of State

## Current Principal Place of Business:

8490 S LAKE FORREST DR  
FORT LAUDERDALE, FL 33328

## New Principal Place of Business:

8490 S LAKE FOREST DR  
DAVIE, FL 33328

## Current Mailing Address:

8490 S LAKE FORREST DR  
FORT LAUDERDALE, FL 33328

## New Mailing Address:

8490 S LAKE FOREST DR  
DAVIE, FL 33328

FEI Number: 65-0938806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOFFMAN, PERLA  
8490 S LAKE FOREST DRIVE  
DAVIE, FL 33328 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HOFFMAN, PERLA  
Address: 8490 S LAKE FOREST DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: T ( ) Delete  
Name: HOFFMAN, RICHARD E  
Address: 8490 S LAKE FOREST DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HOFFMAN, PERLA  
Address: 8490 S LAKE FOREST DRIVE  
City-St-Zip: DAVIE, FL 33328

Title: S/T (X) Change ( ) Addition  
Name: HOFFMAN, RICHARD E  
Address: 8490 S LAKE FOREST DRIVE  
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PERLA HOFFMAN

P

04/04/2007

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

\_\_\_\_\_  
Date