

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 20, 2005 8:00 am**  
**Secretary of State**

01-20-2005 90023 018 \*\*\*150.00

**DOCUMENT # V45480**

1. Entity Name

PERLMUTTER MANAGEMENT OF FLORIDA, INC.



Principal Place of Business

1033 E OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33334

Mailing Address

1033 E OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33334

40003433



01132005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

65-0344915

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

PERLMUTTER, ROSALIND  
1033 E OAKLAND PARK BLVD  
FT LAUDERDALE, FL 33334

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Rosalind Perlmutter

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/13/05

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE President  
NAME PERLMUTTER, ROSALIND  
STREET ADDRESS 1033 E. OAKLAND PARK BLVD.  
CITY-ST-ZIP FT. LAUDERDALE, FL 33334

TITLE CFO  
NAME PAWAROO, PERRY  
STREET ADDRESS 1033 E OAKLAND PARK BLVD  
CITY-ST-ZIP FT LAUDERDALE, FL 33334

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Perry Pawaroo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/05

Date

954 567 6313

Daytime Phone #