


**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
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40003433



01132005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0344915</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		

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 DATE 1/13/05  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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 NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> PERLMUTTER, ROSALIND 1033 E. OAKLAND PARK BLVD. FT. LAUDERDALE, FL 33334
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>CFO</u> PAWAROO, PERRY 1033 E OAKLAND PARK BLVD FT LAUDERDALE, FL 33334
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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 DATE 1/13/05 Daytime Phone # 954 567 6313  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR