2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001549

Entity Name: PEARLS FOUNDATION, INC.

Current Principal Place of Business:

7925 PLANTATION BLVD MIRAMAR. FL 33023

Current Mailing Address:

P.O. BOX 17531

FT. LAUDERDALE. FL 33318-7531 US

FEI Number: 65-1084517 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELL, LISA 7925 PLANTATION BLVD MIRAMAR, FL 33023 US

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: LISA BELL 02/26/2020

Electronic Signature of Registered Agent

Date

FILED Feb 26, 2020

Secretary of State

9234068168CC

Officer/Director Detail:

Title PD Title SECRETARY, DIRECTOR

NameBELL, LISANameCAREY, CAMIKAAddress7925 PLANTATION BLVDAddress950 NW 33RD DR.

City-State-Zip: MIRAMAR FL 33023 City-State-Zip: LAUDERHILL FL 33311-6546

Title DIRECTOR Title DIRECTOR

Name RELIFORD, RAMONA Name SNIPES, SHIRLEY

Address 2909 NW 33 TERRACE Address 7617 NW 70TH AVENUE

City-State-Zip: LAUDERDALE LAKES FL 33311 City-State-Zip: TAMARAC FL 33321-5224

Title TREASURER, DIRECTOR Title VP

Name HAYES, MARGARETTE Name IRISH, SANDRA

Address 7601 BANYAN WAY Address 636 WEST EVANSTON CIRCLE

City-State-Zip: TAMARAC FL 33321-2616 City-State-Zip: FORT LAUDERDALE FL 33312

Title DIRECTOR Title DIRECTOR

NameBROWN, LINDANameBLAKE, MARY JENELLAddress5640 SW 4 COURTAddress2201 N.W. 168TH AVE

City-State-Zip: PLANTATION FL 33317 City-State-Zip: PEMBROKE PINES FL 33028

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LISA BELL PRESIDENT 02/26/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name WARD, ERICA

Address 2889 NW 11TH PLACE

City-State-Zip: FORT LAUDERDALE FL 33311