

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000011405

**Entity Name:** MAJORCA ISLES IV CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 24, 2013**  
**Secretary of State**  
**CC4082970921**

**Current Principal Place of Business:**

10081 PINES BLVD  
SUITE # E-1  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

10081 PINES BLVD  
SUITE # E-1  
PEMBROKE PINES, FL 33024 US

**FEI Number: 26-1535612**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LAW OFFICES OF MARLON E. BRYAN, P.A.  
5701 SHERIDAN STREET  
HOLLYWOOD, FL 33021 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name JEROME, BERRY  
Address 10081 PINES BLVD SUITE #E-1  
City-State-Zip: PEMBROKE PINES FL 33024

Title VP  
Name TAMIR, OFFER  
Address 10081 PINES BLVD SUITE # E-1  
City-State-Zip: PEMBROKE PINES FL 33024

Title T  
Name CHARLES, ERNEST  
Address 10081 PINES BLVD SUITE# E-1  
City-State-Zip: PEMBROKE PINES FL 33024

Title S  
Name JACKSON, ALDO  
Address 10081 PINES BLVD SUITE# E-1  
City-State-Zip: PEMBROKE PINES FL 33024

Title D  
Name PAUL, DECINOB  
Address 10081 PINES BLVD SUITE# E-1  
City-State-Zip: PEMBROKE PINES FL 33024

*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: BERRY JEROME**

**PRESIDENT**

**04/24/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date