

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000007164

**Entity Name:** PEMBROKE PARK CARES, INC.

**Current Principal Place of Business:**

3150 SW 52ND AVENUE  
PEMBROKE PARK, FL 33023

**Current Mailing Address:**

3150 SW 52ND AVENUE  
PEMBROKE PARK, FL 33023

**FEI Number: 81-4847408**

**Certificate of Status Desired: Yes**

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

RYAN, CHRISTOPHER J  
700 EAST DANIA BEACH BOULEVARD  
DANIA BEACH, FL 33004 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: CHRISTOPHER J RYAN**

**03/08/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name CLARK, HOWARD PJR.  
Address 3150 SW 52ND AVENUE  
City-State-Zip: PEMBROKE PARK FL 33023

Title D  
Name MOHAMMED, ASHIRA  
Address 3150 SW 52ND AVENUE  
City-State-Zip: PEMBROKE PARK FL 33023

Title D  
Name SHOAFF, EMMA  
Address 3150 SW 52ND AVENUE  
City-State-Zip: PEMBROKE PARK FL 33023

Title D  
Name PAGE, LILLIE ANN  
Address 3150 SW 52ND AVENUE  
City-State-Zip: PEMBROKE PARK FL 33023

Title DIRECTOR  
Name SAMUELS, BRANDON  
Address 3150 SW 52ND AVENUE  
City-State-Zip: PEMBROKE PARK FL 33023

*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: EMMA SHOAFF**

**DIRECTOR**

**03/08/2018**

Electronic Signature of Signing Officer/Director Detail

Date