

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 709241

**Entity Name:** INTERCONDOMINIUM, INC.

**Current Principal Place of Business:**

1790 79TH STREET CAUSEWAY  
B101  
NORTH BAY VILLAGE, FL 33141

**Current Mailing Address:**

POST OFFICE BOX 41-4126  
MIAMI BEACH, FL 33141 US

**FEI Number:** 30-0990243

**Certificate of Status Desired:** Yes

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

TRULLENQUE, ANTHONY L ESQ.  
7098 BONITA DRIVE  
MIAMI BEACH, FL 33141 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:** ANTHONY L TRULLENQUE

05/03/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           KALIL, GEORGE  
Address        1790 79TH STREET CAUSEWAY  
                  B101  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title            DIRECTOR  
Name           PILOTO, MARILYN  
Address        1790 79TH STREET CAUSEWAY  
                  B101  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title            SECRETARY  
Name           GONZALEZ-SORELL, FE D  
Address        1790 79TH STREET CAUSEWAY  
                  B101  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title            VP, / TREASURER  
Name           SCHIAFFINO, LEONARDO  
Address        1790 79TH STREET CAUSEWAY  
                  B101  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title            DIRECTOR  
Name           MORALES, DAYAMI  
Address        1790 79TH STREET CAUSEWAY  
                  B101  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title            DIRECTOR  
Name           FELLMAN, SIDNEY  
Address        1790 79TH STREET CAUSEWAY  
                  B101  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title            DIRECTOR  
Name           ACUNA, GLORIA  
Address        1790 79TH STREET CAUSEWAY  
                  B101  
City-State-Zip: NORTH BAY VILLAGE FL 33141

*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:** LEONARDO SCHIAFFINO

VP/TREASURER

05/03/2023

Electronic Signature of Signing Officer/Director Detail

Date