

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709638

Entity Name: 1035 MERIDIAN CONDOMINIUM INCORPORATED**Current Principal Place of Business:**1035 MERIDIAN AVE.
MIAMI BEACH, FL 33139**Current Mailing Address:**C/O BLUE LEAF MANAGEMENT
P.O BOX 190239
MIAMI BEACH, FL 33119 US**FEI Number:** 59-2662398**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLUE LEAF MANAGEMENT
C/O BLUE LEAF MANAGEMENT
1688 MERIDIAN AVENUE SUITE 729
MIAMI BEACH, FL 33139 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:** DOMINIQUE BAILLEUL

04/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, DIRECTOR
Name VOLENEC, RUDY
Address C/O BLUE LEAF MANAGEMENT
 P.O BOX 190239
City-State-Zip: MIAMI BEACH FL 33119

Title PRESIDENT, DIRECTOR
Name PEREZ, DENIO
Address C/O BLUE LEAF MANAGEMENT
 P.O BOX 190239
City-State-Zip: MIAMI BEACH FL 33119

Title VP, DIRECTOR
Name LANZA, ANGELO
Address C/O BLUE LEAF MANAGEMENT
 P.O BOX 190239
City-State-Zip: MIAMI BEACH FL 33119

Title SECRETARY
Name TORRES, ANGELA
Address C/O BLUE LEAF MANAGEMENT
 P.O BOX 190239
City-State-Zip: MIAMI BEACH FL 33119

Title DIRECTOR
Name RAMOS , LUIS
Address C/O BLUE LEAF MANAGEMENT
 P.O BOX 190239
City-State-Zip: MIAMI BEACH FL 33119

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: PEREZ DENIO

PRESIDENT

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date