

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709953

**Entity Name:** SAN REMO, INC., A CONDOMINIUM

**Current Principal Place of Business:**

2871 N. OCEAN BLVD.  
BOCA RATON, FL 33431

**FILED**  
**Feb 25, 2021**  
**Secretary of State**  
**6197895221CC**

**Current Mailing Address:**

2871 N. OCEAN BLVD.  
BOCA RATON, FL 33431

**FEI Number: 59-1202524**

**Certificate of Status Desired: No**

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

BECKER & POLIAKOFF, P.A.  
625 NORTH FLAGLER DR  
7TH FLOOR  
WEST PALM BEACH, FL 33401 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 DIRECTOR  
Name DESIMONE, RALPH  
Address 2871 N OCEAN BLVD R256  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name FORTI, JAMES  
Address 2871 N. OCEAN BLVD, C107  
City-State-Zip: BOCA RATON FL 33431

Title PRESIDENT  
Name AMOROSANO, JOHN  
Address 2871 N. OCEAN BLVD.,  
M330  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name MAGNO, LEO  
Address 2871 N. OCEAN BLVD.,  
C215  
City-State-Zip: BOCA RATON FL 33431

Title TREASURER  
Name MALFITANO, MARC  
Address 2871 N OCEAN BLVD.,  
R660  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name PINKERTON, BRIAN  
Address 2871 N. OCEAN BLVD.,F433  
City-State-Zip: BOCA RATON FL 33431

Title SECRETARY  
Name CANNING, ISABEL  
Address 2871 N. OCEAN BLVD.,  
F127  
City-State-Zip: BOCA RATON FL 33431

Title 2ND VP  
Name CURITORE, KENNETH  
Address 2871 N. OCEAN BLVD.  
R350  
City-State-Zip: BOCA RATON FL 33431

**Continues on page 2**

*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: JOHN AMOROSANO**

**PRESIDENT**

**02/25/2021**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name DULIN, THOMAS  
Address 2871 N OCEAN BLVD,  
D408  
City-State-Zip: BOCA RATON FL 33431