

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

DOCUMENT# 712954

**Entity Name:** JADE WINDS ASSOCIATION, INC.**Current Principal Place of Business:**1700 NE 191 STREET  
NORTH MIAMI BEACH, FL 33179**Current Mailing Address:**1700 NE 191 STREET  
NORTH MIAMI BEACH, FL 33179 US**FEI Number:** 59-1220918**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETERS & PETERS, ATTORNEYS AT LAW, P.A.  
9900 STIRLING ROAD  
232  
COOPER CITY, FL 33024 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:** KEVIN G. PETERS

01/19/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           KAHN, RODOLFO  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            TREASURER  
Name           PIGNATELLI, JUANA B.  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            DIRECTOR  
Name           RAYMOND, SUSAN  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            DIRECTOR  
Name           MOINELO, CRISTINA D  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            DIRECTOR  
Name           HERNANDEZ, ADRIAN  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            DIRECTOR  
Name           AGIN, LAWRENCE  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            DIRECTOR  
Name           AYAD, MAGDY  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title            SECRETARY  
Name           PEREZ, DIANA  
Address        1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

**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:** RODOLFO KAHN

PRESIDENT

01/19/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASSISTANT SECRETARY  
Name REVILLA, TULIO  
Address 1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR  
Name SCHINAGL, SUELI  
Address 1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR  
Name ZAMBRANO, ENRIQUE  
Address 1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIR  
Name ARIAS, GUILLERMO  
Address 1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR  
Name MONZOTE, YOEL  
Address 1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title VP  
Name LOTSOS, EVA M.  
Address 1700 NE 191 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIR  
Name SUSANA, GIRALDO  
Address 1700 NE 191ST STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33179