

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714821

**Entity Name:** IMPERIAL TOWERS CONDOMINIUM, INC.**Current Principal Place of Business:**1825 S. OCEAN DRIVE  
HALLANDALE BEACH, FL 33009**Current Mailing Address:**1825 S. OCEAN DRIVE  
HALLANDALE BEACH, FL 33009**FEI Number:** 59-1269958**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HOLODAK, EDWARD F P.A.  
7951 SW 6TH STREET - SUITE # 210  
PLANTATION, FL 33324 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:** EDWARD F. HOLODAK

04/10/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BARTSOCAS, KIKI  
Address        1825 S. OCEAN DRIVE #709  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            VP  
Name            KAZ, MIKHAIL  
Address        1817 S. OCEAN DRIVE #1015  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            TREASURER  
Name            KING, DEBORA  
Address        1817 S. OCEAN DR #321  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            SECRETARY  
Name            FRIEDMAN, SANDY  
Address        1817 S. OCEAN DRIVE #621  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            MONTERO, MARTHA  
Address        1817 S. OCEAN DRIVE #816  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            MARTINEZ, RAUL  
Address        1817 S. OCEAN DR #PH17  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            SOMMA, LELA  
Address        1825 S. OCEAN DRIVE #PH01  
City-State-Zip: HALLANDALE BEACH FL 33009

*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:** DEBORA KING

TREASURER

04/10/2017

Electronic Signature of Signing Officer/Director Detail

Date