2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 717061

Entity Name: THREE HORIZONS, SOUTH, CONDOMINIUM, INC.

FILED
Mar 22, 2019
Secretary of State
6047437319CC

Current Principal Place of Business:

1465 NE 123RD STREET

4TH FLOOR

NORTH MIAMI, FL 33161

Current Mailing Address:

C/O CLEAR SKY PROPERTY MANAGEMENT 2929 SW 3 AVENUE SUITE 330 MIAMI, FL 33129 US

FEI Number: 59-1438437 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICE OF MICHAEL E. REHR, PA 9500 S. DADELAND BLVD. SUITE 550 MIAMI, FL 33156 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: MICHAEL E. REHR 03/22/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title D

Name PALEY, RICHARD Name NORDLUND, MARIE CLAIRE

Address C/O CLEAR SKY PROPERTY Address C/O CLEAR SKY PROPERTY

MANAGEMENT MANAGEMENT

2929 SW 3 AVENUE SUITE 330 2929 SW 3 AVENUE SUITE 330

City-State-Zip: MIAMI FL 33129 City-State-Zip: MIAMI FL 33129

Title SD Title TD

Name FEEST, DESIREE Name FERNANDEZ, MANUEL

Address C/O CLEAR SKY PROPERTY Address C/O CLEAR SKY PROPERTY

MANAGEMENT MANAGEMENT

2929 SW 3 AVENUE SUITE 330 2929 SW 3 AVENUE SUITE 330

City-State-Zip: MIAMI FL 33129 City-State-Zip: MIAMI FL 33129

Title D Title D

Name ROCHA, ANTONIO Name OZUNA, DANIEL

Address C/O CLEAR SKY PROPERTY Address C/O CLEAR SKY PROPERTY

MANAGEMENT MANAGEMENT

2929 SW 3 AVENUE SUITE 330 2929 SW 3 AVENUE SUITE 330

City-State-Zip: MIAMI FL 33129 City-State-Zip: MIAMI FL 33129

Title VPD

Name MORELL, MARIBEL

Address C/O CLEAR SKY PROPERTY

MANAGEMENT

2929 SW 3 AVENUE SUITE 330

City-State-Zip: MIAMI FL 33129

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: RICHARD PALEY PD 03/22/2019