

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

DOCUMENT# 717098

**Entity Name:** RO-MONT GARDENS ANDOVER CONDOMINIUM "K", INC.

**Current Principal Place of Business:**

52 N.E. 204TH ST.  
MIAMI GARDENS, FL 33179

**Current Mailing Address:**

52 NE 204 STREET  
MIAMI GARDENS, FL 33179 US

**FEI Number:** 59-1364102

**Certificate of Status Desired:** No

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

ROMONT GARDENS ANDOVER CONDO K  
52 NE 204 STREET  
MIAMI GARDENS, FL 33179 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:** MAUREEN RADZIKOWSKI

01/31/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FRAZIER, CELESTINE  
Address        52 NE 204 STREET  
                  5  
City-State-Zip: MIAMI GARDENS FL 33179

Title            TREASURER  
Name            RADZIKOWSKI, MAUREEN  
Address        52 NE 204 STREET  
                  15  
City-State-Zip: MIAMI GARDEDNS FL 33179

Title            SECRETARY  
Name            JOHNSON, MARY J  
Address        52 NE 204 STREET  
                  27  
City-State-Zip: MIAMI GARDENS FL 33179

Title            DIRECTOR  
Name            VASQUEZ, ELIZABETH  
Address        52 NE 204 STREET  
                  18  
City-State-Zip: MIAMI GARDENS FL 33179

Title            VP  
Name            LEVERT, SYLVAIN  
Address        52 NE 204 STREET  
                  24  
City-State-Zip: MIAMI GARDENS FL 33179

Title            DIRECTOR  
Name            ROLLINS, MARY ANN  
Address        52 NE 204 STREET  
                  14  
City-State-Zip: MIAMI GARDENS FL 33179

*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:** MAUREEN RADZIKOWSKI

**TREASURER**

01/31/2021

Electronic Signature of Signing Officer/Director Detail

Date