

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 719105

Entity Name: MONTECRISTI COUNTRY CLUB APARTMENTS, INC.

Current Principal Place of Business:

C/O OBELISK MANAGEMENT GROUP
5701 N PINE ISLAND ROAD STE. 340
TAMARAC, FL 33321

Current Mailing Address:

C/O OBELISK MANAGEMENT GROUP
PO BOX 25354
TAMARAC, FL 33320 US

FEI Number: 59-1358730

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TUCKER & LOKEINSKY, P.A
800 EAST BROWARD BOULEVARD
SUITE 710
FORT LAUDERDALE, FL 33301 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: JESSICA R. LOKEINSKY, ESQ.

03/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LAURETANO, ANGELA
Address C/O OBELISK MANAGEMENT GROUP
PO BOX 25354
City-State-Zip: TAMARAC FL 33320

Title PRESIDENT
Name VIANA , CLEVERSON
Address C/O OBELISK MANAGEMENT GROUP
PO BOX 25354
City-State-Zip: TAMARAC FL 33320

Title SECRETARY
Name BRUCE, RAFAEL
Address C/O OBELISK MANAGEMENT GROUP
PO BOX 25354
City-State-Zip: TAMARAC FL 33320

Title TREASURER
Name GUIMARAES , EDUARDO
Address C/O OBELISK MANAGEMENT GROUP
PO BOX 25354
City-State-Zip: TAMARAC FL 33320

Title DIRECTOR
Name VIANA , ALEXSON
Address C/O OBELISK MANAGEMENT GROUP
PO BOX 25354
City-State-Zip: TAMARAC FL 33320

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: CLEVERSON VIANA

PRESIDENT

03/08/2023

Electronic Signature of Signing Officer/Director Detail

Date