2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 719519

Entity Name: PRESIDENTIAL CONDOMINIUM OWNERS ASSOCIATION

FILED Apr 12, 2024 **Secretary of State** 4504958249CC

Current Principal Place of Business:

401 OCEAN DRIVE

SUITE 200

MIAMI BEACH, FL 33139

Current Mailing Address:

401 OCEAN DRIVE

SUITE 200

MIAMI BEACH, FL 33139 US

FEI Number: 59-1303251 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BACKER ABOUD POLIAKOFF & FOELSTER LLP 400 S DIXIE HIGHWAY STE 420 BOCA RATON, FL 33432 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: KEITH F. BACKER 04/12/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **TREASURER** Title **SECRETARY**

LOPEZ, LEANDRO FORMAN, KIMBERLY Name Name

Address **401 OCEAN DRIVE** Address **401 OCEAN DRIVE**

#200 #200

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title VΡ Title **PRESIDENT**

BALI, MICHAEL Name Name STOJANOSKI, KRSTE

401 OCEAN DRIVE 401 OCEAN DRIVE Address Address #200 #200

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title **DIRECTOR** Title **DIRECTOR** JIMENEZ, GERMAN XAVIER LEKA, GZIME Name Name

Address 401 OCEAN DRIVE Address **401 OCEAN DRIVE**

#200 #200

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33139

Title **DIRECTOR**

Address **401 OCEAN DRIVE** #200

Name

City-State-Zip: MIAMI BEACH FL 33139

BOUCHARD, KAREN

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.

04/12/2024 SIGNATURE: KRSTE STOJANOSKI **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date