

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719928

**Entity Name:** PLAZA DEL PRADO CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**18071 BISCAYNE BOULEVARD  
AVENTURA, FL 33160**Current Mailing Address:**18071 BISCAYNE BLD  
AVENTURA, FL 33160 US**FEI Number: 59-1349416****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SKRLD, INC.  
201 ALHAMBRA CIRCLE, 11TH FLOOR  
CORAL GABLES, FL 33134 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title P  
Name JOSEPH, ROSE  
Address 18071 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

Title VP  
Name DIAMOND, IRA  
Address 18071 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

Title D  
Name GEHAMI, JULIANA  
Address 18071 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

Title T  
Name SCHWIMMER, RICARDO  
Address 18071 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

Title D  
Name MELNIKOV, VALERY  
Address 18071 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

Title S  
Name MAISHLISH, EMMANUEL  
Address 18071 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

Title DIRECTOR  
Name LYNN, DAVID  
Address 18071 BISCAYNE BLVD  
City-State-Zip: AVENTURA FL 33160

*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: ROSE JOSEPH****PRESIDENT****04/22/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date