

2023 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 BOULEVARD
AVENTURA, FL 33160 US**FEI Number: 59-1349416****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RENBAUM, KAYE BENDER
1200 PARK CENTRAL BLVD S
POMPANO BEACH, FL 33064 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	PRESIDENT
Name	ALLENDE, BEATRIZ
Address	18071 BISCAYNE BLVD
City-State-Zip:	AVENTURA FL 33160

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

Title	TREASURER
Name	KIDRON, LISA
Address	18071 BISCAYNE BLVD
City-State-Zip:	AVENTURA FL 33160

Title	SECRETARY
Name	SPEVACK, DAN
Address	18071 BISCAYNE BLVD
City-State-Zip:	AVENTURA FL 33160

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

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

Title	DIRECTOR
Name	SNIDER, TED
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: ALLENDE, BEATRIZ**PRESIDENT****02/01/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date