

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

DOCUMENT# 720455

**FILED**  
**Jan 18, 2021**  
**Secretary of State**  
**4579753657CC**

**Entity Name:** THE ROSE CONDOMINIUM, INC.

**Current Principal Place of Business:**

7725 CARLYLE AVE  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

PO BOX 4807  
MIAMI BEACH, FL 33141 US

**FEI Number: 59-1372400**

**Certificate of Status Desired: No**

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

ACCRISTO, ORLANDO  
7725 CARLYLE AVENUE  
#11  
MIAMI BEACH, FL 33141 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            PRES  
Name            ARANGO, MAURICIO  
Address        1990 MARSEILLES DRIVE #401  
City-State-Zip: MIAMI BEACH FL 33141

Title            PRESIDENT  
Name            ARANGO, MAURICIO  
Address        1990 MARSEILLE DR  
                  MIAMI BEACH # 401  
City-State-Zip: MIAMI BEACH FL 33141

Title            V  
Name            ARANGO, MAURICIO  
Address        1990 MARSEILLES DRIVE #401  
City-State-Zip: MIAMI BEACH FL 33141

Title            P  
Name            GOLDBERG, EZEQUIEL  
Address        777 BRICKEL AVE #500-83947  
City-State-Zip: MIAMI FL 33131

Title            S  
Name            FATOUH, JACKELINE  
Address        1331 LINCOLN RD #903  
City-State-Zip: MIAMI BEACH FL 33141

*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: MAURICIO ARANGO**

**VICEPRESIDENT**

**01/18/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date