

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

DOCUMENT# 720563

**Entity Name:** MAISON GRANDE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6039 COLLINS AVE.  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

6039 COLLINS AVE.  
MIAMI BEACH, FL 33140 US

**FEI Number:** 59-1377619

**Certificate of Status Desired:** No

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

SKRLD INC.  
SKRLD INC.  
201 ALHAMBRA CIRCLE #1100  
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:** HELIO DE LA TORRE

04/23/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SANCHEZ, LILLY ANN  
Address        1441 BRICKELL AVENUE, SUITE 1200  
City-State-Zip: MIAMI FL 33131

Title            VP  
Name            KOHLI, PRAMINDER  
Address        6039 COLLINS AVE.  
City-State-Zip: MIAMI BEACH FL 33140

Title            DIRECTOR  
Name            RENES, CECILIA  
Address        6039 COLLINS AVE.  
City-State-Zip: MIAMI BEACH FL 33140

Title            TREASURER  
Name            TORRES, BRENDA J  
Address        6039 COLLINS AVE.  
City-State-Zip: MIAMI BEACH FL 33140

Title            SECRETARY  
Name            SANCHEZ, MIGUEL  
Address        6039 COLLINS AVE.  
City-State-Zip: MIAMI BEACH FL 33140

Title            DIRECTOR  
Name            BOSSI, CARL  
Address        6039 COLLINS AVE.  
City-State-Zip: MIAMI BEACH FL 33140

Title            DIRECTOR  
Name            BENITO, URBANO  
Address        6039 COLLINS AVE.  
City-State-Zip: MIAMI BEACH FL 33140

*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:** MIGUEL SANCHEZ

**SECRETARY**

04/23/2021

Electronic Signature of Signing Officer/Director Detail

Date