

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

DOCUMENT# 725547

**Entity Name:** FOUNTAIN TOWERS CONDOMINIUM, INC.**Current Principal Place of Business:**7118 BONITA DRIVE  
APT 204  
MIAMI BEACH, FL 33141**Current Mailing Address:**FOUNTAIN TOWERS CONDOMINIUM  
1234 WASHINGTON AVE SUITE 200  
MIAMI BEACH, FL 33139 US**FEI Number:** 59-1579491**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GONGORA, MICHAEL  
121 ALHAMBRA CIRCLE  
BECKER & POLIAKOFF 10TH 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:** GONGORA, MICHAEL

04/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BATULE-BREWSTER, ADA  
Address        7118 BONITA DRIVE  
                  701  
City-State-Zip: MIAMI BEACH FL 33141

Title            SECRETARY  
Name            OVIEDO, SANDRA  
Address        7118 BONITA DRIVE  
                  501  
City-State-Zip: MIAMI BEACH FL 33141

Title            TREASURER  
Name            OLIS, ROBERT  
Address        7118 BONITA DRIVE  
                  905  
City-State-Zip: MIAMI BEACH FL 33141

Title            DIRECTOR  
Name            ROJAS, RAUL  
Address        7118 BONITA DRIVE  
                  201  
City-State-Zip: MIAMI BEACH FL 33141

Title            DIRECTOR  
Name            RABASA, RUBEN  
Address        7118 BONITA DRIVE  
                  802  
City-State-Zip: MIAMI BEACH FL 33141

Title            MANAGER  
Name            SCHAPIRO, DANIEL  
Address        1234 WASHINGTON AVE  
                  SUITE 200  
City-State-Zip: MIAMI BEACH FL 33139

*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:** BATULE-BREWSTER, ADA

PRESIDENT

04/15/2021

Electronic Signature of Signing Officer/Director Detail

Date