

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

DOCUMENT# 725720

**Entity Name:** BEMAR PATIO CONDOMINIUM ASSOCIATION INC**Current Principal Place of Business:**1100 WEST 35TH STREET  
HIALEAH, FL 33012**Current Mailing Address:**1100 WEST 35TH STREET  
HIALEAH, FL 33012**FEI Number: 59-2070941****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**CABEZAS, JORGE  
1100 W. 35 ST APT # 24  
HIALEAH, FL 33012 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 DIR  
Name CABEZAS, JORGE  
Address 1100 W 35TH STREET APT.# 24  
City-State-Zip: HIALEAH FL 33012

Title OFFI  
Name RODRIGUEZ, WILFREDO  
Address 1100 W 35TH STREET APT.# 11  
City-State-Zip: HIALEAH FL 33012

Title OFFI  
Name PEREZ, ROSARIO  
Address 1100 W 35TH STREET APT. # 1  
City-State-Zip: HIALEAH FL 33012

Title OFFI  
Name DIEZ, MARGOT  
Address 1100 W 35 ST APT # 31  
City-State-Zip: HIALEAH FL 33012

Title OFFI  
Name HERRERA, MARGARITA  
Address 1100 W. 35TH STREET APT.# 21  
City-State-Zip: HIALEAH FL 33012

Title OFFI  
Name ORTA, IVAN  
Address 1100 W 35 ST APT # 18  
City-State-Zip: HIALEAH FL 33012

Title TREASURER  
Name NOVALES, FRANCISCO  
Address 1100 WEST 35TH ST  
#32  
City-State-Zip: HIALEAH FL 33012

*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: JORGE CABEZAS****DIRECTOR****02/19/2021**

Electronic Signature of Signing Officer/Director Detail

Date