

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727354

**FILED  
Apr 27, 2016  
Secretary of State  
CC2922149426**

**Entity Name:** KEY BISCAYNE ONE HUNDRED CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

100 OCEAN LANE DRIVE  
#104  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

3934 S.W.8TH STREET  
303  
CORAL GABLES, FL 33134

**FEI Number: 59-1521879**

**Certificate of Status Desired: No**

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

DE LA CAMARA, ROSA ESQ.  
121 ALHAMBRA PLAZA, 10 TH 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name BIGNON, ROMAIN  
Address 3934 S.W. 8TH STREET  
SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name RIESSER, MARIA  
Address 3934 S.W. 8TH STREET  
SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY  
Name POINTET, MICHAEL  
Address 3934 S.W. 8TH STREET  
SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER  
Name AREVALO, VIOLETA  
Address 3934 S.W. 8TH STREET  
SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

*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: ROMAIN BIGNON**

**P**

**04/27/2016**

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

\_\_\_\_\_  
Date