

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 734849

**Entity Name:** WEST FLAGLER HERITAGE NUMBER TWO CONDOMINIUM, INC.

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC7749107205**

**Current Principal Place of Business:**

10851 S.W. 2ND. STREET  
MIAMI, FL 33174

**Current Mailing Address:**

175 FONTAINEBLEAU BLVD.  
SUITE 2-J3  
MIAMI, FL 33172 US

**FEI Number: 59-1775204**

**Certificate of Status Desired: No**

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

P&M MANAGEMENT SERVICES, INC.  
175 FONTAINEBLEAU BLVD.  
SUITE 2-J3  
MIAMI, FL 33172 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/D  
Name DUASSO, MANUEL  
Address 175 FONTAINEBLEAU BLVD.  
SUITE 2-J3  
City-State-Zip: MIAMI FL 33172

Title S/D  
Name FAJARDO, LUIS  
Address 175 FONTAINEBLEAU BLVD.  
SUITE 2-J3  
City-State-Zip: MIAMI FL 33172

Title T/D  
Name MEDINA, ANA  
Address 175 FONTAINEBLEAU BLVD.  
SUITE 2-J3  
City-State-Zip: MIAMI FL 33172

Title D  
Name SISO, JUAN  
Address 175 FONTAINEBLEAU BLVD.  
SUITE 2-J3  
City-State-Zip: MIAMI FL 33172

Title VP/D  
Name PALMIERI, BERTHA  
Address 175 FONTAINEBLEAU BLVD.  
SUITE 2-J3  
City-State-Zip: MIAMI FL 33172

*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: MANUEL DUASSO**

**PRESIDENT**

**04/23/2015**

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

\_\_\_\_\_  
Date