

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736355

**Entity Name:** GABLES WAY CONDOMINIUM, INC.**Current Principal Place of Business:**650 CORAL WAY  
CORAL GABLES, FL 33134**Current Mailing Address:**GABLES WAY CONDO C/O PREFERRED ACCOUNTING  
7440 SW 50 TER SUITE 106  
MIAMI, FL 33155 US**FEI Number:** 59-1699421**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KUPERMAN, MARC A  
7695 SW 104 STREET  
SUITE 210  
MIAMI, FL 33156 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	SANCHEZ, CARLOS
Address	GABLES WAY CONDO C/O PREFERRED ACCOUNTING 7440 SW 50 TER SUITE 106
City-State-Zip:	MIAMI FL 33155

Title	D
Name	ARIAS, LOURDES
Address	GABLES WAY CONDO C/O PREFERRED ACCOUNTING 7440 SW 50 TER SUITE 106
City-State-Zip:	MIAMI FL 33155

Title	TD
Name	ARENCIBIA, MIRIAM
Address	GABLES WAY CONDO C/O PREFERRED ACCOUNTING 7440 SW 50 TER SUITE 106
City-State-Zip:	MIAMI FL 33155

Title	SECRETARY
Name	AGUDO, CARLOTA
Address	GABLES WAY CONDO C/O PREFERRED ACCOUNTING 7440 SW 50 TER SUITE 106
City-State-Zip:	MIAMI FL 33155

Title	VP
Name	SCHAFF, BARBARA
Address	7440 SW 50TH TERRACE 106
City-State-Zip:	MIAMI FL 33155

*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:** CARLOS SANCHEZ**PRESIDENT****03/31/2022**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date