

2013 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:**C/O CPM CORP
1801 CORAL WAY #305
MIAMI, FL 33145 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	C/O CPM CORP 1801 CORAL WAY #305
City-State-Zip:	MIAMI FL 33145

Title	VD
Name	AGUDO, CARLOTA
Address	C/O CPM CORP 1801 CORAL WAY #305
City-State-Zip:	MIAMI FL 33145

Title	TD
Name	ARENCIBIA, MIRIAM
Address	C/O CPM CORP 1801 CORAL WAY #305
City-State-Zip:	MIAMI FL 33145

Title	D
Name	RINALDI, PHILLIP
Address	C/O CPM CORP 1801 CORAL WAY #305
City-State-Zip:	MIAMI FL 33145

Title	D
Name	ARENCIBIA, ALEJANDRO
Address	C/O CPM CORP 1801 CORAL WAY #305
City-State-Zip:	MIAMI FL 33145

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

PRES

02/15/2013

Electronic Signature of Signing Officer/Director Detail_____
Date