

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 23, 2024
Secretary of State
3515379786CC

Entity Name: PALM-AIRE COUNTRY CLUB CONDOMINIUM ASSOCIATION NO. 7, INC.

Current Principal Place of Business:

C/O M&M PROPERTY MGMT LLC
1280 SW 36 AVE SUITE 305
POMPANO BEACH, FL 33069

Current Mailing Address:

C/O M&M PROPERTY MGMT LLC
1280 SW 36 AVE SUITE 305
POMPANO BEACH, FL 33069 US

FEI Number: 59-1702482

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BASULTO ROBBINS & ASSOCIATES, LLP
14160 NW 77 COURT
STE. 22
MIAMI LAKES, FL 33016-1506 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: RUSSELL ROBBINS

02/23/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GASPARINI, GRAZIANO
Address C/O M&M PROPERTY MGMT LLC
 1280 SW 36 AVE SUITE 305
City-State-Zip: POMPANO BEACH FL 33069

Title VP
Name LATUFF, ANIBAL
Address C/O M&M PROPERTY MGMT LLC
 1280 SW 36 AVE SUITE 305
City-State-Zip: POMPANO BEACH FL 33069

Title TREASURER
Name KROWITZ, SUSAN
Address C/O M&M PROPERTY MGMT LLC
 1280 SW 36 AVE SUITE 305
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name MOLEIRO, JOSE
Address C/O M&M PROPERTY MGMT LLC
 1280 SW 36 AVE SUITE 305
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name ALVES, MAFALDA
Address C/O M&M PROPERTY MGMT LLC
 1280 SW 36 AVE SUITE 305
City-State-Zip: POMPANO BEACH FL 33069

Title SECRETARY
Name ETTORRE, HENRI
Address C/O M&M PROPERTY MANAGEMENT
 LLC
 1280 SW 36TH AV SUITE 305
City-State-Zip: POMPANO BEACH FL 33069

Title DIRECTOR
Name FUENTES, ARMANDO
Address 1280 SW 36 AVE
 SUITE 305
City-State-Zip: POMPANO BEACH FL 33069

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: GRAZIANO GASPARINI

PRESIDENT

02/23/2024

Electronic Signature of Signing Officer/Director Detail

Date