

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748150

**Entity Name:** TURNBERRY ISLE SOUTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**19667 TURNBERRY WAY  
AVENTURA, FL 33180**Current Mailing Address:**19667 TURNBERRY WAY  
AVENTURA, FL 33180**FEI Number:** 59-1980227**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLAXBERG, BARRY I  
25 SE AVE  
#730  
MIAMI, FL 33131 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 DIRECTOR  
Name HOBERMAN, PABLO  
Address 19667 TRUNBERY WAY  
City-State-Zip: AVENTURA FL 33180

Title VP  
Name FALLAS, EDDIE  
Address 19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

Title SECRETARY  
Name FRANCO, ABE  
Address 19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

Title PRESIDENT  
Name PERESS, MIKE  
Address 19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

Title TREASURER  
Name SCHREIBER, NORMAN  
Address 19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR  
Name DAYAN, ALBERTO  
Address 19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR  
Name SAFDIAH, CHARLES  
Address 19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR  
Name SILVERSTEIN, BARRY  
Address 19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

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*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:** EDDIE FALLAS

VICE PRESIDENT

03/13/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           TREASURER  
Name           HAFIF, JOSEPH  
Address        19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180

Title           ASST. SECRETARY  
Name           SCHEPPS, JONATHAN  
Address        19667 TURNBERRY WAY  
City-State-Zip: AVENTURA FL 33180