#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 754078** 

Entity Name: LISETTE CONDOMINIUM ASSOCIATION, INC.

FILED Feb 20, 2018 Secretary of State CC7964295413

## **Current Principal Place of Business:**

1990 MARSEILLE DRIVE MIAMI BEACH. FL 33141

## **Current Mailing Address:**

4654 WEST 4 AVE HIALEAH. FL 33012

FEI Number: 59-2130925 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SPECIALIZED PROPERTY MANAGEMENT CORP 4654 WEST 4 AVE HIALEAH, FL 33012 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: EILEEN MONTERO 02/20/2018

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** CARBY, MICHELE Name ZJACIC, MILENKA Name 4654 WEST 4 AVE Address 4654 WEST 4 AVE Address City-State-Zip: HIALEAH FL 33012 HIALEAH FL 33012 City-State-Zip:

Title SECRETARY Title DIRECTOR

NameMOLINA, LUISNameARANGO, MAURICIOAddress4654 WEST 4 AVEAddress4654 WEST 4 AVECity-State-Zip:HIALEAH FL 33012City-State-Zip:HIALEAH FL 33012

Title DIRECTOR Title DIRECTOR

NameSAVAGLIO, OLGANameRIVIERO, ALBERTOAddress4654 WEST 4 AVEAddress4654 W 4 AVECity-State-Zip:HIALEAH FL 33012City-State-Zip:HIALEAH FL 33012

Title DIRECTOR

Name BELL, CAMERON

Address 4654 W 4 AVE

City-State-Zip: HIALEAH FL 33012

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: MICHELE CARBY PRESIDENT 02/20/2018