2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754078

Entity Name: LISETTE CONDOMINIUM ASSOCIATION, INC.

FILED Mar 01, 2016 **Secretary of State** CC9974326107

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 03/01/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** MONTERO, EILEEN 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 DIRECTOR Title **SECRETARY**

Name ARANGO, MAURICIO RIVERO, ALBERTO Name Address 4654 WEST 4 AVE Address 4654 WEST 4 AVE HIALEAH FL 33012 City-State-Zip: City-State-Zip: HIALEAH FL 33012

Title DIRECTOR **DIRECTOR** Title

Name CARBONELL, CLAUDIO ZUNIGA, ALBERT Name Address 4654 WEST 4 AVE 4654 WEST 4 AVE Address City-State-Zip: HIALEAH FL 33012

City-State-Zip: HIALEAH FL 33012

Title DIRECTOR

SAVAGLIO, OLGA Name 4654 WEST 4 AVE Address 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: MONTERO, EILEEN

Electronic Signature of Signing Officer/Director Detail

03/01/2016 Ρ