

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754605

**Entity Name:** ABBOTT GARDENS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 26, 2013**  
**Secretary of State**  
**CC4327619348**

**Current Principal Place of Business:**

8101 BYRON AVE  
207  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

8101 BYRON AVE  
MIAMI BEACH, FL 33141 00

**FEI Number: 59-2369502**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ASSAEL, ISIDORO  
8101 BYRON AVE  
207  
MIAMI BEACH, FL 33141 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 TD  
Name ROGELIO, RODRIGUEZ  
Address 8101 BYRON AVE #504  
City-State-Zip: MIAMI BEACH FL 33141

Title SD  
Name NEREIDA, MENDEZ  
Address 8101 BYRON AVE #512  
City-State-Zip: MIAMI BEACH FL 33141

Title D  
Name BORSDDS, EVA  
Address 8101 BYRON AVE #503  
City-State-Zip: MIAMI BEACH FL 33141

Title PD  
Name ASSAEL, ISIDORO  
Address 8101 BYRON AVE 207  
City-State-Zip: MIAMI BEACH FL 33141

Title VD  
Name LOPEZ, REINALDO  
Address 8101 BYRON AVE #406  
City-State-Zip: MIAMI BEACH FL 33141

Title D  
Name GARROTE, MANUEL  
Address 8101 BYRON AVE, # 507  
City-State-Zip: MIAMI BEACH FL 33141

*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: ASSAEL, ISIDORO**

**PD**

**04/26/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date