

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761003

**Entity Name:** VICTORY GARDENS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**650 NE 149 ST  
OFFICE  
MIAMI, FL 33161-2279**Current Mailing Address:**650 NE 149 ST  
OFFICE  
MIAMI, FL 33161-2279**FEI Number:** 59-2383780**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AVILA-CASTILLO, JUAN  
650 NE 149 ST  
OFFICE  
MIAMI, FL 33161-2279 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:** JUAN AVILA-CASTILLO

04/12/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            AVILA-CASTILLO, JUAN  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

Title            VP  
Name            RUIZ, XAVIER  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

Title            TREA  
Name            RUIZ, FRANCISCO J.  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

Title            DIRECTOR  
Name            MENCIA, SUYAPA  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

Title            DIRECTOR  
Name            SURIEL, APOLINAR JR  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

Title            DIRECTOR  
Name            ETIENNE, WILNER  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

Title            DIRECTOR  
Name            DIPOKROMO, MISKAN  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

Title            SECRETARY  
Name            NAVARRO, LILIANA  
Address        650 NE 149 ST  
                  OFFICE  
City-State-Zip: MIAMI FL 33161-2279

*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:** JUAN A. AVILA-CASTILLO

PRESIDENT

04/12/2021

Electronic Signature of Signing Officer/Director Detail

Date