## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 762961** 

Entity Name: COMMERCIAL CENTER OF MIAMI #1 CONDOMINIUM

ASSOCIATION, INC.

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

6043-6065 N.W. 167 STREET MIAMI LAKES, FL 33015

## **Current Mailing Address:**

C/O CAM MANAGEMENT SERVICES P.O. BOX 5103 HIALEAH, FL 33014 US

FEI Number: 65-0279579 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CAM MANAGEMENT SERVICES, CORP. 6065 N.W. 167TH ST. UNIT B19

MIAMI LAKES, FL 33015 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Feb 06, 2020

**Secretary of State** 

6821297885CC

Officer/Director Detail:

Title Title TD

GONZALEZ, RENE S RODRIGUEZ, KHRISTIAN Name Name

Address C/O CAM MANAGEMENT SERVICES Address C/O CAM MANAGEMENT SERVICES

P.O. BOX 5103 P.O. BOX 5103

City-State-Zip: HIALEAH FL 33014 City-State-Zip: HIALEAH FL 33014

VΡ Title Title SD

Name DI MITRI, BEN Name VELANDIA, WILSON

Address C/O CAM MANAGEMENT SERVICES Address C/O CAM MANAGEMENT SERVICES

City-State-Zip:

P.O. BOX 5103 P.O. BOX 5103

**ALTERNATE** Title Name MINA, OSSAMA Address P.O.BOX 5103

HIALEAH FL 33014

City-State-Zip: HIALEAH FL 33014-1103

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: RENE S. GONZALEZ

**PRESIDENT** 

HIALEAH FL 33014

02/06/2020