

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768019

Entity Name: THE TROPICANA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**

15645 COLLINS AVE.
1ST FLOOR OFFICE
SUNNY ISLES BEACH, FL 33160-4762

Current Mailing Address:

15645 COLLINS AVE.
1ST FLOOR OFFICE
SUNNY ISLES BEACH, FL 33160-4762 US

FEI Number: 59-2348203**Certificate of Status Desired: No****Name and Address of Current Registered Agent:**

EISINGER BROWN LEWIS FRANKEL & CHAIET, PA
4000 HOLLYWOOD BLVD - SUITE 265-S
HOLLYWOOD, FL 33021 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 PRESIDENT
Name SAMET, DANIEL
Address 15645 COLLINS AVE.
 1ST FLOOR OFFICE
City-State-Zip: SUNNY ISLES BEACH FL 33160-4762

Title VP
Name GRAHAM, JAMES K
Address 15645 COLLINS AVE.
 1ST FLOOR OFFICE
City-State-Zip: SUNNY ISLES BEACH FL 33160-4762

Title SECRETARY
Name MERALI, KARIM
Address 15645 COLLINS AVE.
 1ST FLOOR OFFICE
City-State-Zip: SUNNY ISLES BEACH FL 33160-4762

Title TREASURER
Name PIZZUTO, PAOLO
Address 15645 COLLINS AVE.
 1ST FLOOR OFFICE
City-State-Zip: SUNNY ISLES BEACH FL 33160-4762

Title DIRECTOR
Name FILGUEIRA, GERMAN
Address 15645 COLLINS AVE.
 1ST FLOOR OFFICE
City-State-Zip: SUNNY ISLES BEACH FL 33160-4762

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: DANIEL SAMET**PRESIDENT****01/25/2018**

Electronic Signature of Signing Officer/Director Detail

Date