

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769720

FILED
Apr 30, 2019
Secretary of State
7905179128CC

Entity Name: TOWER PROFESSIONAL PLAZA CONDOMINIUM ASSOCIATIO, INC.

Current Principal Place of Business:

C/O ALTON MADISON PROP MGMT
381 N KROME AVENUE, SUITE 205
HOMESTEAD, FL 33030

Current Mailing Address:

C/O ALTON MADISON PROP MGMT
381 N KROME AVENUE, SUITE 205
HOMESTEAD, FL 33030

FEI Number: 59-2778217

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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: MARIA ARIAS

04/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, TREASURER
Name MOHAMAD, SHAHMOHAMADY
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR, SECRETARY
Name KADEL, KURT
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title PRESIDENT, DIRECTOR
Name TALEBI, TONY DR.
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name COTURE, MICHELLE
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR, VP
Name CETTA, KARL W
Address 381 N KROME AVENUE
205
City-State-Zip: HOMESTEAD FL 33030

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: DR. TONY TALEBI

P

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date