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: LUIS CASTILLO

1

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: 2908 ROYAL PALM CONDOMINIUM ASSOCIATION, INC.

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

2908 ROYAL PALM AVE #2 MIAMI BEACH. FL 33140

DOCUMENT# N0100007205

#### **Current Mailing Address:**

2908 ROYAL PALM AVE#2 MIAMI BEACH. FL 33140

### FEI Number: 52-2369331

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

CASTILLO, LUIS . 2908 ROYAL PALM AVE#2 MIAMI BEACH, FL 33140 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:

# Officer/Dire

Title	D	Title	D
Name	CASTILLO, LUIS	Name	JUAN, AXEL
Address	2908 ROYAL PALM AVE #2	Address	2908 ROYAL PALM AVE #3
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	MIAMI BEACH FL 33140

	Electronic Signature of Registered Agent							
C	ctor Detail :							
	D	Title	D					
	CASTILLO, LUIS	Name	JUAN, AXEL					

DIRECTOR

04/11/2017 Date

FILED Apr 11, 2017 **Secretary of State** CC6218482406

Certificate of Status Desired: No

Date