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: FLORA RAY

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

Certificate of Status Desired: No

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

#### C

City-State-Zip: MIAMI FL 33179

Officer/Director Detail :				
Title	Р	Title	VP	
Name	AZARI, YORAM	Name	RAY, FLORA	
Address	825 N E 199 ST #208	Address	825 NE 199	
City-State-Zip:	MIAMI FL 33179	City-State-Zip:	MIAMI FL 33179	
Title	S			
Name	KLEIN, MINDY			
Name	RLEIN, MIND F			
Address	825 N E 199 ST #204			

2017 EL ORIDA NO	T FOR PROFIT CORPO	RATION ANNUAL REPORT

### DOCUMENT# N01337

Entity Name: CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "13" ASSOCIATION, INC.

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

825 N.E. 199TH STREET 107 MIAMI, FL 33179

## **Current Mailing Address:**

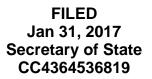
825 N.E. 199TH STREET 107 MIAMI, FL 33179 US

#### FEI Number: 59-2431866

# Name and Address of Current Registered Agent:

RAY, FLORA M 825 N E 199 ST 107

MIAMI, FL 33179 US



Date

01/31/2017

Date