

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004834

FILED
Apr 30, 2021
Secretary of State
7622889327CC

Entity Name: GRAND LAKES PHASE I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

14950 SW 8TH TERRACE
MIAMI, FL 33194

Current Mailing Address:

C/O MIAMI POWERHOUSE MANAGEMENT
1000 FIFTH STREET SUITE 218
MIAMI BEACH, FL 33139 US

FEI Number: 20-0032403

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PABLO A. ARRIOLA, ESQ.
8901 SW 157 AVE
#16-189
MIAMI, FL 33196 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: PABLO A. ARRIOLA

04/30/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CUADRA, CARLOS M
Address C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET SUITE 218
City-State-Zip: MIAMI BEACH FL 33139

Title TREASURER
Name LEON, MICHAEL
Address C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET SUITE 218
City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY
Name LONGO, CESAR
Address C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET SUITE 218
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name LOPEZ, VICENTE
Address C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET SUITE 218
City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY
Name ESCOBAR, GUILLERMO
Address C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET SUITE 218
City-State-Zip: MIAMI BEACH FL 33139

Title D
Name CASTILLO, TEIGLYS
Address C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET SUITE 218
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name HENRIQUEZ, NATHALIE
Address C/O MIAMI POWERHOUSE
 MANAGEMENT
 1000 FIFTH STREET SUITE 218
City-State-Zip: MIAMI BEACH FL 33139

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: CARLOS CUADRA

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04/30/2021

Electronic Signature of Signing Officer/Director Detail

Date