

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005369

**Entity Name:** SOUTH POINTE COVE CONDOMINIUM ASSOCIATION INC.

**FILED**  
**Jan 20, 2023**  
**Secretary of State**  
**0337109495CC**

**Current Principal Place of Business:**

18901 SW 106TH AVENUE  
STE 210  
MIAMI, FL 33157

**Current Mailing Address:**

18901 SW 106TH AVENUE  
STE 210  
MIAMI, FL 33157 US

**FEI Number: 75-3171464**

**Certificate of Status Desired: No**

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

CASTELLANOS, REINALDO  
LAW OFFICES OF REINALDO CASTELLANOS  
9960 BIRD ROAD  
MIAMI, FL 33165 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: REINALDO CASTELLANOS**

**01/20/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            RODRIGUEZ, JAIRO  
Address        C/O INNOVATIVE PROPERTY  
                  MANAGEMENT  
                  18901 SW 106TH AVENUE STE 210  
City-State-Zip: MIAMI FL 33157

Title            VP  
Name            BARRIOS, MARCOS  
Address        C/O INNOVATIVE PROPERTY  
                  MANAGEMENT  
                  18901 SW 106TH AVENUE STE 210  
City-State-Zip: MIAMI FL 33157

Title            SECRETARY  
Name            SILVA, MAURA  
Address        C/O INNOVATIVE PROPERTY  
                  MANAGEMENT  
                  18901 SW 106TH AVENUE STE 210  
City-State-Zip: MIAMI FL 33157

Title            TREASURER  
Name            REYES BONILLA, BERNARDA  
Address        C/O INNOVATIVE PROPERTY  
                  MANAGEMENT  
                  18901 SW 106TH AVENUE STE 210  
City-State-Zip: MIAMI FL 33157

Title            DIRECTOR  
Name            TORRES, AQUARIO  
Address        C/O INNOVATIVE PROPERTY  
                  MANAGEMENT  
                  18901 SW 106TH AVENUE SUITE 210  
City-State-Zip: MIAMI FL 33157

*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: JAIRO RODRIGUEZ**

**PRESIDENT**

**01/20/2023**

Electronic Signature of Signing Officer/Director Detail

Date