

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000009092

**Entity Name:** SKYLOFTS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1789-1791  
NE MIAMI GARDENS DRIVE  
MIAMI, FL 33179**Current Mailing Address:**P.O. BOX 521458  
MIAMI, FL 33152 US**FEI Number:** 20-0607571**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RUSSI, RICARDO  
13248 SW 8TH STREET  
MIAMI, FL 33184 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:** RICARDO RUSSI

09/15/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	EDELSTEIN, JONATHAN
Address	3585 NE 207TH STREET #C9-80039
City-State-Zip:	AVENTURA FL 33180
Title	SECRETARY
Name	CONFORTE, ZUNILDA
Address	1789 NE MIAMI GARDENS DRIVE W302
City-State-Zip:	MIAMI FL 33179
Title	DIRECTOR
Name	KLIMAN, SHARON
Address	1791 NE MIAMI GARDENS DRIVE E405
City-State-Zip:	MIAMI FL 33179

Title	VP
Name	DJMAL, MARTIN
Address	1789 NE MIAMI GARDENS DRIVE W602
City-State-Zip:	MIAMI FL 33179
Title	DIRECTOR
Name	KAHN, PAMELA
Address	1791 NE MIAMI GARDENS DRIVE E404
City-State-Zip:	MIAMI FL 33179
Title	DIRECTOR
Name	FLORES, DOMINICK
Address	1789 NE MIAMI GARDENS DRIVE W504
City-State-Zip:	MIAMI FL 33179

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:** JONATHAN EDELSTEIN

PRESIDENT

09/15/2017

Electronic Signature of Signing Officer/Director Detail

Date