

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000009092

**Entity Name:** SKYLOFTS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 30, 2019**  
**Secretary of State**  
**8152253139CC**

**Current Principal Place of Business:**

1789-1791  
NE MIAMI GARDENS DRIVE  
MIAMI, FL 33179

**Current Mailing Address:**

13248 SW 8TH ST  
MIAMI, FL 33184 US

**FEI Number:** 20-0607571

**Certificate of Status Desired:** Yes

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

KALAJIAN, ALEX  
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:** ALEX KALAJIAN

04/30/2019

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	DIRECTOR
Name	FLORES, DOMINICK
Address	1789 NE MIAMI GARDENS DRIVE W504
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	OFFICER
Name	KALAJIAN, ALEX
Address	257 PARK AVENUE SOUTH 303
City-State-Zip:	NEW YORK NY 10010

*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:** ALEX KALAJIAN

OFFICER

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date