

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010124

**FILED**  
**Jan 26, 2016**  
**Secretary of State**  
**CC7093240547**

**Entity Name:** EAST MEDLEY BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8125 NW 74 AVENUE  
1-8  
MEDLEY, FL 33178

**Current Mailing Address:**

PO BOX 667808  
MIAMI, FL 33166

**FEI Number: 16-1702177**

**Certificate of Status Desired: No**

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

MP PROPERTY MGMT  
ATTN: MYRIAM PALACIOS  
8240 NW 52 TERRACE SUITE 204  
DORAL, FL 33166 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           TREASURER  
Name           COSEANO, DANIEL  
Address        8125 NW 74 AVENUE #1  
City-State-Zip: MIAMI FL 33178

Title           P  
Name           MIRANDA, WILLIAM J  
Address        10598 NW SOUTH RIVER DRIVE  
City-State-Zip: MEDLEY FL 33178

Title           SECRETARY  
Name           RAMIREZ, OSVALDO  
Address        8125 NW 74 AVENUE  
                  UNIT 3  
City-State-Zip: MEDLEY FL 33178

*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: MIRANDA , WILLIAM J**

**P**

**01/26/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date