

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

DOCUMENT# N04000002283

**FILED**  
**Apr 30, 2019**  
**Secretary of State**  
**2811970609CC**

**Entity Name:** SONARA AT MALIBU BAY NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O 381 N. KROME AVENUE  
SUITE 205  
HOMESTEAD, FL 33033

**Current Mailing Address:**

ALTON MADISON PROPERTY MGMT  
381 N. KROME AVENUE SUITE 205  
HOMESTEAD, FL 33033 US

**FEI Number: 20-0826800**

**Certificate of Status Desired: No**

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

PAUL A. MCKENNA & ASSOCIATES, P.A.  
703 WATERFORD WAY  
SUITE 220  
MIAMI, FL 33126 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           PRESIDENT, DIRECTOR  
Name           DURAN, ROSA  
Address        381 N KROME AVENUE #205  
City-State-Zip: HOMESTEAD FL 33030

Title           DIRECTOR  
Name           ROQUE, IDALIA  
Address        381 N KROME AVENUE #205  
City-State-Zip: HOMESTEAD FL 33030

Title           SECRETARY, DIRECTOR  
Name           FIORE, FRANK ANTHONY  
Address        381 N KROME AVENUE #205  
City-State-Zip: HOMESTEAD FL 33030

Title           TREASURER, DIRECTOR  
Name           FIGUEROA, MARIELA  
Address        381 N KROME AVENUE #205  
City-State-Zip: HOMESTEAD FL 33030

Title           DIRECTOR  
Name           QUINONES, MANUEL  
Address        381 N KROME AVENUE #205  
City-State-Zip: HOMESTEAD FL 33030

Title           VP, DIRECTOR  
Name           LOPES, SERGIO  
Address        381 N KROME AVENUE #205  
City-State-Zip: HOMESTEAD FL 33030

Title           DIRECTOR  
Name           BELLOSO, JUAN CARLOS  
Address        381 N KROME AVENUE #205  
City-State-Zip: HOMESTEAD FL 33030

Title           DIRECTOR  
Name           COWARD, ANNA  
Address        381 N. KROME AVENUE  
                  # 205  
City-State-Zip: HOMESTEAD FL 33033

**Continues on page 2**

*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: FRANK A. FIORE**

**SECRETARY**

**04/30/2019**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            OTERO, HECTOR  
Address        381 N. KROME AVENUE  
                  # 205  
City-State-Zip:  HOMESTEAD FL 33033