

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

DOCUMENT# N04000004027

**Entity Name:** HIGHPOINT CONDOMINIUM ASSOCIATION OF MIAMI, INC.

**Current Principal Place of Business:**

616 NW 26TH AVENUE  
MIAMI, FL 33125

**Current Mailing Address:**

C/O PREFERRED ACCOUNTING SERVICES, INC.  
4913 SW 74TH CT  
MIAMI, FL 33155 US

**FEI Number:** 20-1110442

**Certificate of Status Desired:** No

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

PREFERRED ACCOUNTING SERVICES, INC.  
4913 SW 74TH CT  
MIAMI, FL 33155 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 P  
Name CEVARES, JULIO  
Address 616 NW 26TH AVE, APT 302  
City-State-Zip: MIAMI FL 33125

Title VP  
Name CASANOVA, MIGUEL ANGEL  
Address 616 NW 26TH AVE. APT 409  
City-State-Zip: MIAMI FL 33125

Title T  
Name MARIN, PATRICIA  
Address 616 NW 26TH AVE, APT 408  
City-State-Zip: MIAMI FL 33125

Title S  
Name VILLAREAL, LOURDES  
Address 616 NW 26TH AVE, APT 302  
City-State-Zip: MIAMI FL 33125

*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:** JULIO CEVARES

P

04/25/2016

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

\_\_\_\_\_  
Date