

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N04000006724

**Entity Name:** KIM AIMEE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4015 N. MERIDIAN AVE.  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

SOBE MANAGEMENT  
333 W 41ST STREET SUITE 614  
MIAMI BEACH, FL 33140 US

**FEI Number:** 65-1230087

**Certificate of Status Desired:** No

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

SOBE MANAGEMENT C/O PHILIPPE LAMERY, C/O AGATA GOGOLEWSKA  
333 WEST 41ST STREET  
SUITE 614  
MIAMI BEACH, FL 33140 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:** PHILIPPE LAMERY

09/22/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, PRESIDENT  
Name GRIEGO, ARTURO G.  
Address 333 WEST 41ST STREET  
SUITE 614  
City-State-Zip: MIAMI BEACH FL 33140

Title TREASURER  
Name BROWNE, JULIA SEIDER  
Address 333 WEST 41ST STREET  
SUITE 614  
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR  
Name GIRONA, ANDREW  
Address 333 WEST 41ST STREET  
SUITE 614  
City-State-Zip: MIAMI BEACH FL 33140

Title PHILIPPE LAMERY  
Name SOBE MANAGEMENT C/O PHILIPPE  
LAMERY C/O AGATA GOGOLEWSKA  
Address 333 W 41ST STREET  
SUITE 614  
City-State-Zip: MIAMI BEACH FL 33140

*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:** PHILIPPE LAMERY

CAM

09/22/2021

Electronic Signature of Signing Officer/Director Detail

Date