2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000598

Entity Name: FORMALIS CONDOMINIUM ASSOCIATION, INC.

FILED Feb 02, 2018 Secretary of State CC9574532897

Current Principal Place of Business:

C/O CHANTALLE DIETSCH 814 PONCE DE LEON BLVD., #503 CORAL GABLES, FL 33134

Current Mailing Address:

C/O CHANTALLE DIETSCH 814 PONCE DE LEON BLVD., #503 CORAL GABLES, FL 33134 US

FEI Number: 20-2707699 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CUEVAS,GARCIA & TORRES, P.A. 7480 SW 40 STREET SUITE 600 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: ANDREW CUEVAS 02/02/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

 Title
 TREASURER
 Title
 PRESIDENT

 Name
 MARINO, JOSE
 Name
 LOPEZ, JASON

Address C/O CHANTALLE DIETSCH Address C/O CHANTALLE DIETSCH

814 PONCE DE LEON BLVD., #503 814 PONCE DE LEON BLVD., #503

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

 Title
 VP
 Title
 SECRETARY

 Name
 TOCA, MARIO A
 Name
 SIMEON, ACELIA

Address C/O CHANTALLE DIETSCH Address C/O CHANTALLE DIETSCH

814 PONCE DE LEON BLVD., #503 814 PONCE DE LEON BLVD., #503

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name PEREZ, ROBERT

Address C/O CHANTALLE DIETSCH

814 PONCE DE LEON BLVD., #503

City-State-Zip: CORAL GABLES FL 33134

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: JASON LOPEZ PRESIDENT 02/02/2018