## 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. PRESIDENT

SIGNATURE: SANDRA DELGADO

Electronic Signature of Signing Officer/Director Detail

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

#### **Officer/Director Detail :**

Title	PD	Title	V
Name	DELGADO, SANDRA D	Name	PRADO, EVELYN
Address City-State-Zip:	1940 SW 4TH ST APT 7 C MIAMI FL 33135	Address	7523 SW 109 AVE
		City-State-Zip:	MIAMI FL 33175
Title	TSD		
Name	HERNANDEZ, ERACLIA R		
Address	1940 SW 4 STREET APT 8		
City-State-Zip:	MIAMI FL 33135		

Entity Name: ISLAS CANARIAS, A CONDOMINIUM ASSOCIATION, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

1940 SW 4 ST APT. 7 MIAMI, FL 33135

### **Current Mailing Address:**

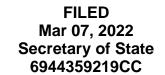
DOCUMENT# N0500005203

P.O BOX 111555 MIAMI, FL 33011 US

#### FEI Number: 71-0986282

Name and Address of Current Registered Agent:

PRADO, EVELYN 7523 SW 109 AVE. MIAMI, FL 33173 US



Certificate of Status Desired: No

03/07/2022

Date

Date