

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000007921

**Entity Name:** CARIBBEAN TOWERS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 05, 2014**  
**Secretary of State**  
**CC8672159135**

**Current Principal Place of Business:**

7545 E TREASURE DRIVE  
# CONDO OFFICE  
NORTH BAY VILLAGE, FL 33141

**Current Mailing Address:**

440 NE 73RD STREET  
MIAMI, FL 33138

**FEI Number:** 20-3273092

**Certificate of Status Desired:** No

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

ASSOCIATION LAW GROUP  
1666 KENNEDY CAUSEWAY  
SUITE #305  
NORTH BAY VILLAGE, FL 33154 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 BELTRAME, MARIANO  
Address 7545 E TREASURE DRIVE  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title T  
Name DUVAL, WENDY  
Address 7545 E TREASURE DRIVE  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title SECRETARY  
Name HICKS, JR, SHEARL R  
Address 7545 E TREASURE DRIVE  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title SECRETARY  
Name GARAY, SAVINA  
Address 7545 E TREASURE DRIVE  
# CONDO OFFICE  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title D  
Name PULPEIRD, JORGE  
Address 7545 E TREASURE DRIVE  
# CONDO OFFICE  
City-State-Zip: NORTH BAY VILLAGE FL 33141

Title DIRECTOR  
Name DILLA, VIRGINIA  
Address 7545 E TREASURE DRIVE  
City-State-Zip: NORTH BAY VILLAGE FL 33141

*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:** SHEARL RAY HICKS, JR

**SECRETARY**

**03/05/2014**

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

\_\_\_\_\_  
Date