

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N05000007974

**Entity Name:** BLUE LAGOON CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Sep 01, 2023**  
**Secretary of State**  
**5906862584CC**

**Current Principal Place of Business:**

5077 NW 7TH STREET  
SUITE # 400  
MIAMI, FL 33126

**Current Mailing Address:**

5077 NW 7TH STREET  
SUITE # 400  
MIAMI, FL 33126 US

**FEI Number: 20-3260924**

**Certificate of Status Desired: No**

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

HABER LAW P.A.  
251 NW 23 STREET  
MIAMI, FL 33127 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            PRESIDENT, DIRECTOR  
Name            MACDAVI, MARVIN  
Address        5077 NW 7TH STREET  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

Title            VP, DIRECTOR  
Name            TAHAN, ANTHONY  
Address        5077 NW 7TH ST.  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

Title            TREASURER  
Name            RAMESH, PADMA  
Address        5077 NW 7TH STREET  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

Title            SECRETARY  
Name            LOZANO, MARIA  
Address        5077 NW 7TH STREET  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

Title            OFFICER  
Name            INGUANZO, YOUSSEF  
Address        5077 NW 7TH STREET  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

Title            DIRECTOR  
Name            MARTIN, GUILLERMO  
Address        5077 NW 7TH STREET  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

Title            DIRECTOR  
Name            CHOCANO, FRANCO  
Address        5077 NW 7TH STREET  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

Title            DIRECTOR  
Name            GARCIA, CAROLINE  
Address        5077 NW 7TH STREET  
                 SUITE # 400  
City-State-Zip: MIAMI FL 33126

*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: MARVIN MACDAVI**

**PRESIDENT**

**09/01/2023**

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

\_\_\_\_\_  
Date