## 2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000012788

Entity Name: BAYVIEW PALMS CONDOMINIUM ASSOCIATION, INC.

**FILED** Oct 31, 2022 Secretary of State 5474314225CC

## **Current Principal Place of Business:**

1800 & 1805 SANS SOUCI BLVD. N. MIAMI. FL 33181

## **Current Mailing Address:**

1805 SANS SOUCI BLVD. MANAGEMENT OFFICE N.MIAMI, FL 33181

FEI Number: 20-5092099 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

GOEDE & ADAMCZYK, PLLC 2600 DOUGLAS ROAD SUITE 717 CORAL GABLES, FL 33134 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:

Address

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** GLORIA, LOPEZ Name COHEN, YAIR Name

Address 1805 SANS SOUCI BLVD, MGMT Address 1805 SANS SOUCI BLVD. MANAGEMENT OFFICE

**OFFICE** 

N.MIAMI FL 33181 City-State-Zip: NORTH MIAMI FL 33181 City-State-Zip:

Title **TREASURER** Title DIRECTOR

MARTI, MARINA Name NOCHETTI, MARCELO Name

> 1805 SANS SOUCI BLVD. Address 1805 SANS SOUCI BLVD.

MANAGEMENT OFFICE MANAGEMENT OFFICE

N.MIAMI FL 33181 N.MIAMI FL 33181 City-State-Zip: City-State-Zip:

Title **DIRECTOR** 

ZAMALLOA, HEIDY Name

Address 1805 SANS SOUCI BLVD.

MANAGEMENT OFFICE

City-State-Zip: N.MIAMI FL 33181

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.

10/31/2022 SIGNATURE: YAIR COHEN **PRESIDENT**