2075 NE 164TH ST. NORTH MIAMI BEACH, FL 33162				
Current Mailing Address: 13358 SW 128TH ST.				
MIAMI, FL 33186 US FEI Number: 20-4408173			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
AGE RE SERVICES, LLC 3162 COMMODORE PLAZA, SUITE 3E COCONUT GROVE, , FL 33133 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: ISRAEL KOPEL			J , , , , , , , , , , , , , , , , , , ,	onda.
SIGNATURE	E ISRAEL KOPEL	Ũ		04/08/2024
SIGNATURE	Electronic Signature of Registered Agent			
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent			04/08/2024
	Electronic Signature of Registered Agent	Title	TD	04/08/2024
Officer/Dire	Electronic Signature of Registered Agent			04/08/2024
Officer/Dire Title	Electronic Signature of Registered Agent ctor Detail : PRESIDENT	Title	TD	04/08/2024
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : PRESIDENT KOPEL, ISRAEL 1111 KANE CONCOURSE SUITE #201	Title Name Address	TD CIRERA, LETICIA B. 1111 KANE CONCCOURSE	04/08/2024
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : PRESIDENT KOPEL, ISRAEL 1111 KANE CONCOURSE SUITE #201	Title Name Address	TD CIRERA, LETICIA B. 1111 KANE CONCCOURSE SUITE 201	04/08/2024
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : PRESIDENT KOPEL, ISRAEL 1111 KANE CONCOURSE SUITE #201 BAY HARBOR FL 33154	Title Name Address	TD CIRERA, LETICIA B. 1111 KANE CONCCOURSE SUITE 201	04/08/2024

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: INLAND TOWERS CONDOMINIUM ASSOCIATION, INC.

DOCUMENT# N06000001981

Current Principal Place of Business:

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: KOPEL, ISRAEL

City-State-Zip: BAY HARBOR, FL 33154

Electronic Signature of Signing Officer/Director Detail

04/08/2024

FILED Apr 08, 2024

Secretary of State

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