

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000005695

**Entity Name:** WINDS OF NOBE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8300 CRESPI BLVD.  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

C/O: URBAN RESOURCE, INC  
PO BOX 415700  
MIAMI BEACH, FL 33139

**FEI Number:** 30-0390686

**Certificate of Status Desired:** No

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

URBAN RESOURCE, INC  
ATTN: JAVIER ZUNIGA  
1193 71ST STREET  
MIAMI BEACH, FL 33141 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 DIRECTOR  
Name VALDERRAMA, JOSE  
Address 635 83RD STREET UNIT 47  
City-State-Zip: MIAMI BEACH FL 33141

Title VP  
Name FERNANDO, CORSO  
Address 8310 CRESPI BLVD UNIT 5  
City-State-Zip: MIAMI BEACH FL 33141

Title PRESIDENT  
Name MARTINEZ, OSCAR  
Address 8300 CRESPI BLVD  
UNIT 03  
City-State-Zip: MIAMI BEACH FL 33141

Title S  
Name SPERMAN, GUSTAVO  
Address PO BOX 190067  
City-State-Zip: MIAMI BEACH FL 33119

Title TREASURER  
Name KRUPLIN, ALVARO  
Address 9180 WEST BAY HARBOR DRIVE # 2C  
City-State-Zip: BAY HARBOUR FL 33154

*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:** OSCAR MARTINEZ

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03/29/2018

Electronic Signature of Signing Officer/Director Detail

Date