

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004380

Entity Name: ARTECH RESIDENCES AT AVENTURA CONDOMINIUM ASSOCIATION, INC.**FILED**
Mar 29, 2021
Secretary of State
0264220705CC**Current Principal Place of Business:**2950 NE 188 STREET
ATT: MANAGEMENT OFFICE
AVENTURA, FL 33180**Current Mailing Address:**2950 NE 188 STREET
ATT: MANAGEMENT OFFICE
AVENTURA, FL 33180**FEI Number: 26-2963996****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
ATTN: HOWARD PERL
ONE EAST BROWARD BLVD. SUITE 1800
FT. LAUDERDALE, FL 33301 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** SECRETARY
Name GUZMAN, JAVIER
Address 2950 NE 188 STREET
City-State-Zip: AVENTURA FL 33180**Title** VP
Name CASTRO, FABIO
Address 2950 NE 188 STREET
MGMT OFFICE
City-State-Zip: AVENTURA FL 33180**Title** DIRECTOR
Name BERVID, VLASTA
Address 2950 NE 188 ST
MGMT OFFICE
City-State-Zip: AVENTURA FL 33180**Title** PRESIDENT
Name LOYO, PEDRO
Address 2950 NE 188 STREET
MGMT OFFICE
City-State-Zip: AVENTURA FL 33180
Title TREASURER
Name RIVAS WYZYKOWSKA, ROBERTO
Address 2950 NE 188 ST
MGMT OFFICE
City-State-Zip: AVENTURA FL 33180

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: PEDRO LOYO**PRESIDENT****03/29/2021**

Electronic Signature of Signing Officer/Director Detail

Date