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

DOCUMENT# N14000008912

Entity Name: OBH HOTEL FACILITIES CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 11, 2023
Secretary of State
1649627203CC

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

4100 NE 2ND AVE SUITE 201/202 MIAMI, FL 33137

## **Current Mailing Address:**

4100 NE 2ND AVE SUITE 201/202 MIAMI, FL 33137 US

FEI Number: 47-3583640 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

GRANDA, JAVIER 4100 NE 2ND AVE SUITE 201/202 MIAMI, FL 33137 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: JAVIER A. GRANDA 04/11/2023

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title **PRESIDENT** Title VD Name LOWENSTEIN, DIEGO Name KANAVOS, PAUL C 4100 NE 2ND AVE Address Address 4100 NE 2ND AVE SUITE 201/202 SUITE 201/202 City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137 Title **MANAGER** Title **MANAGER** Name GRANDA, JAVIER Name KANAVOS, DAYSSI Address 4100 NE 2ND AVE Address 4100 NE 2ND AVE SUITE 201/202 SUITE 201/202 City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137 Title **MANAGER** Title **MANAGER** BEN JOSEF, RON BEN JOSEF, RONEN Name Name 4100 NE 2ND AVE 4100 NE 2ND AVE Address Address SUITE 201/202 SUITE 201/202 City-State-Zip: MIAMI FL 33137 City-State-Zip: MIAMI FL 33137

Electronic Signature of Signing Officer/Director Detail

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.