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: JOSE SAAD	PD	01/25/2018

SIGNATURE: JOSE SAAD

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent

Name and Address of Current Registered Agent:

SAAD, CARIDAD 20120 W OAKMONT CIRCLE MIAMI, FL 33015 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:

Officer/Director Detail : Title Title PD TD Name SAAD, JOSE Name SAAD, CARIDAD Address 20120 W OAKMONT CIRCLE Address 20120 W OAKMONT CIRCLE City-State-Zip: MIAMI FL 33015 City-State-Zip: MIAMI FL 33015 Title SD Name SAAD, ABRAHAM 20120 W OAKMONT CIRCLE Address MIAMI FL 33015 City-State-Zip:

DOCUMENT# N19962 Entity Name: 24TH AVENUE HOMEOWNERS ASSOCIATION INC.

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

20120 W OAKMONT CIRCLE MIAMI, FL 33015

Current Mailing Address:

20120 W OAKMONT CIRCLE MIAMI. FL 33015 US

FEI Number: 65-0128302

Certificate of Status Desired: No

FILED Jan 25, 2018 Secretary of State CC6496569173

Date

Date