2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000002945

Entity Name: 900 PLACE HOMEOWNER'S ASSOCIATION, INC.

FILED Apr 29, 2022 Secretary of State 2818398817CC

Current Principal Place of Business:

900 NE 4TH ST

FORT LAUDERDALE, FL 33301

Current Mailing Address:

5521 N UNIVERSITY DR,

202

CORAL SPRINGS. FL 33067 US

FEI Number: 86-3612231 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

PMI SOUTH FLORIDA 5521 N UNIVERSITY DR. 202 CORAL SPRINGS, FL 33067 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: JUAN PIRELA 04/29/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

202

PRESIDENT Title Title VΡ

SLUBOWSKY, JERRY Name SMOLEN, BENJAMIN Name Address 5521 N UNIVERSITY DR, Address 5521 N UNIVERSITY DR,

202

CORAL SPRINGS FL 33067 City-State-Zip: City-State-Zip: CORAL SPRINGS FL 33067

Title **TREASURER** Title SECRETARY

BENNET, DOMINIQUE GEDEON, SABRINA Name Name

5521 N UNIVERSITY DR, 5521 N UNIVERSITY DR, Address Address

City-State-Zip: CORAL SPRINGS FL 33067 City-State-Zip: CORAL SPRINGS FL 33067

Title DIRECTOR Title DIRECTOR CHHABRA, ISHPAL COVA, HALVOR Name Name

5521 N UNIVERSITY DR, 5521 N UNIVERSITY DR, Address Address

City-State-Zip: CORAL SPRINGS FL 33067 City-State-Zip: CORAL SPRINGS FL 33067

Title **DIRECTOR** Title **DIRECTOR**

Name FERREIRA, EDUARDO Name RODGERS, JOHN

5521 N UNIVERSITY DR, Address Address 5521 N UNIVERSITY DR,

CORAL SPRINGS FL 33067 City-State-Zip: CORAL SPRINGS FL 33067 City-State-Zip:

Continues on page 2

202

202

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.

04/29/2022 SIGNATURE: JUAN PIRELA MANAGER

Officer/Director Detail Continued:

DIRECTOR Title Title DIRECTOR

Name SOLDATKIN, DMITRY Name GIORDANO, DANIELLE 5521 N UNIVERSITY DR, 5521 N UNIVERSITY DR, Address Address

202

City-State-Zip: CORAL SPRINGS FL 33067 City-State-Zip: CORAL SPRINGS FL 33067

202

Title **DIRECTOR** Title MANAGER Name HEN, ELI Name PIRELA, JUAN

5521 N UNIVERSITY DR, Address Address 5521 N UNIVERSITY DR, 202

City-State-Zip: CORAL SPRINGS FL 33067 City-State-Zip: CORAL SPRINGS FL 33067