

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32407

FILED
Mar 27, 2019
Secretary of State
3553762842CC**Entity Name:** MIAMI LAKES-LAKE CAROL HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**C/O THE CAPIN GROUP
7787 NW 146TH STREET
MIAMI LAKES, FL 33016**Current Mailing Address:**C/O THE CAPIN GROUP
7787 NW 146TH STREET
MIAMI LAKES, FL 33016 US**FEI Number:** 65-0159373**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KORENSTEIN, HAROLD
7787 NW 146TH STREET
MIAMI LAKES, FL 33016 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:** HAROLD KORENSTEIN**03/27/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name AMARO, RENARD
Address C/O THE CAPIN GROUP
7787 NW 146TH STREET
City-State-Zip: MIAMI LAKES FL 33016

Title PRESIDENT
Name KORENSTEIN, HAROLD
Address C/O THE CAPIN GROUP
7787 NW 146 STREET
City-State-Zip: MIAMI LAKES FL 33016

Title TREASURER
Name COSTA, REINALDO
Address C/O THE CAPIN GROUP
7787 NW 146TH STREET
City-State-Zip: MIAMI LAKES FL 33016

Title D
Name FARRES, NANCY
Address C/O THE CAPIN GROUP
7787 NW 146TH STREET
City-State-Zip: MIAMI LAKES FL 33016

Title DIRECTOR
Name PABON, ANDREA
Address C/O THE CAPIN GROUP
7787 NW 146TH STREET
City-State-Zip: MIAMI LAKES FL 33016

Title SECRETARY
Name BERG, MARGO
Address C/O THE CAPIN GROUP
7787 NW 146TH STREET
City-State-Zip: MIAMI LAKES FL 33016

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: HAROLD KORENSTEIN**PRESIDENT****03/27/2019**

Electronic Signature of Signing Officer/Director Detail

Date