

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41878

Entity Name: L'EXCELLENCE CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 15, 2016
Secretary of State
CC9965158383

Current Principal Place of Business:

5757 COLLINS AVE.
ADMIN OFFICE
MIAMI BCH., FL 33140

Current Mailing Address:

5757 COLLINS AVE.
ADMIN OFFICE
MIAMI BCH., FL 33140 US

FEI Number: 65-0247650

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIR STE 1102
CORAL GABLES, FL 33134 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 P
Name VARGAS, JOSE L DR.
Address 5757 COLLINS AVE, APT 606
City-State-Zip: MIAMI BEACH FL 33140

Title VP
Name FERNANDEZ, LUIS
Address 5757 COLLINS AVE, APT1504
City-State-Zip: MIAMI BEACH FL 33140

Title S
Name ROQUE, OLGA M
Address 5757 COLLINS AVE APT 1604
City-State-Zip: MIAMI BEACH FL 33140

Title T
Name FRAGA, JOSE
Address 5757 COLLINS AVE APT 1905
City-State-Zip: MIAMI BCH. FL 33140

Title DIRECTOR
Name PEREZ, ANTONIO
Address 5757 COLLINS AVENUE
APT 2302
City-State-Zip: MIAMI BEACH FL 33140

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 VARGAS

PRESIDENT

04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date