

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002091

**Entity Name:** VILLAGE OF DORAL SANDS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O UNLIMITED PROPERTY MANAGEMENT, LLC  
7665 NW 50 STREET  
MIAMI, FL 33166

**Current Mailing Address:**

C/O UNLIMITED PROPERTY MANAGEMENT, LLC  
7665 NW 50 STREET  
MIAMI, FL 33166 US

**FEI Number:** 65-0527141

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PEREZ-SIAM, FRANK ESQ.  
7001 SW 87 CT  
MIAMI, FL 33173 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 PD  
Name ALEXANDRA, STEFAN  
Address 7665 NW 50 STREET  
City-State-Zip: MIAMI FL 33166

Title T  
Name INCIARTE, LUISA  
Address 7665 NW 50 STREET  
City-State-Zip: MIAMI FL 33166

Title S  
Name HERNANDEZ, PETER  
Address 7665 NW 50 STREET  
City-State-Zip: MIAMI FL 33166

Title D  
Name SANCHEZ, WILFREDO  
Address 7665 NW 50 STREET  
City-State-Zip: MIAMI FL 33166

Title VP  
Name ALEDDA, MARK  
Address 7665 NW 50 STREET  
City-State-Zip: MIAMI FL 33166

*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:** ALEXANDRA STEFAN

**PRESIDENT**

**02/22/2019**

Electronic Signature of Signing Officer/Director Detail

Date