

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000006174

**Entity Name:** WESTWOOD BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 01, 2022**  
**Secretary of State**  
**7152952766CC**

**Current Principal Place of Business:**

16090 SW 184 ST  
MIAMI, FL 33187

**Current Mailing Address:**

P.O. BOX 297255  
PEMBROKE PINES, FL 33029

**FEI Number: 65-0557426**

**Certificate of Status Desired: No**

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

JORGE & ACOSTA LAW, LLC  
8603 S. DIXIE HWY.  
SUITE 210  
MIAMI, FL 33143 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: JENNIFER JORGE**

**04/01/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name FRESNILLO, CARLOS  
Address P.O. BOX 29-7255  
City-State-Zip: PEMBROKE PINES FL 33029

Title TREASURER  
Name RONCHESI, ROSANA  
Address P.O. BOX 29-7255  
City-State-Zip: PEMBROKE PINES FL 33029

Title VP  
Name IRRIBARREN, JOSE F  
Address P.O. BOX 29-7255  
City-State-Zip: PEMBROKE PINES FL 33029

Title PRESIDENT  
Name RAHMANPARAST, MAHMOOD  
Address P.O. BOX 297255  
City-State-Zip: PEMBROKE PINES FL 33029

Title DIRECTOR  
Name QUINTERO, MARIA  
Address P.O. BOX 297255  
City-State-Zip: PEMBROKE PINES FL 33029

*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: MAHMOOD RAHMANPARAST**

**PRESIDENT**

**04/01/2022**

Electronic Signature of Signing Officer/Director Detail

Date