

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000005449

**Entity Name:** MIAMI AIR/WEST TRADE CENTER CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Jan 08, 2015**  
**Secretary of State**  
**CC2079632163****Current Principal Place of Business:**UNLIMITED PROPERTY MANAGEMENT, LLC  
7665 NW 50 STREET  
MIAMI, FL 33166**Current Mailing Address:**UNLIMITED PROPERTY MANAGEMENT, LLC  
7665 NW 50 STREET  
MIAMI, FL 33166 US**FEI Number: 65-0630631****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**UNLIMITED PROPERTY MANAGEMENT, LLC  
7665 NW 50 ST  
MIAMI, FL 33166 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	PRESIDENT
Name	CASTRO , LUCY
Address	7665 NW 50 STREET
City-State-Zip:	MIAMI FL 33166

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

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

Title	TREASURER
Name	MATOS, JAVIER
Address	7665 NW 50 STREET
City-State-Zip:	MIAMI FL 33166

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

Title	DIRECTOR
Name	PIÑON , JUAN
Address	7665 NW 50TH STREET
City-State-Zip:	MIAMI FL 33166

Title	DIRECTOR
Name	MARICHAL, MERCEDES
Address	7665 NW 50TH STREET
City-State-Zip:	MIAMI FL 33166

Title	DIRECTOR
Name	CHAPETON , GUILLERMO
Address	7665 NW 50TH STREET
City-State-Zip:	MIAMI FL 33166

**Continues on page 2**

*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: LUCY CASTRO****PRESIDENT****01/08/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	IKEDA, SEIJIRO
Address	7665 NW 50 TH STREET
City-State-Zip:	MIAMI FL 33166