

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004032

Entity Name: 5900 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.**FILED**
Mar 10, 2020
Secretary of State
3487999063CC**Current Principal Place of Business:**5900 COLLINS AVE
MANAGEMENT OFFICE
MIAMI BEACH, FL 33140**Current Mailing Address:**5900 COLLINS AVE
MANAGEMENT OFFICE
MIAMI BEACH, FL 33140 US**FEI Number:** 22-3611845**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC
201 ALHAMBRA CIRCLE
11TH FLOOR
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:** GARY M. MARS, ESQ.

03/10/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, (D)
Name HETZLER, ROBERT J.
Address 5900 COLLINS AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title VICE-PRESIDENT, (D)
Name ZAMUDIO, JAIME
Address 5900 COLLINS AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title DIRECTOR
Name PESETSKIY, BORIS
Address 5900 COLLINS AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title SECRETARY, (D)
Name GORTARI, LUCIANA
Address 5900 COLLINS AVENUE
City-State-Zip: MIAMI BEACH FL 33140

Title TREASURER, (D)
Name ROLIM, CAROLINA
Address 5900 COLLINS AVENUE
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: HETZLER, ROBERT J.

PRESIDENT

03/10/2020

Electronic Signature of Signing Officer/Director Detail

Date