

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

DOCUMENT# N98000004032

**Entity Name:** 5900 COLLINS AVENUE CONDOMINIUM ASSOCIATION, INC.

**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.

02/22/2019

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

Title            VP, (D)  
Name            AGUIRREBENA, PETER  
Address        5900 COLLINS AVENUE  
City-State-Zip: MIAMI BEACH FL 33140

Title            DIRECTOR, (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**

02/22/2019

Electronic Signature of Signing Officer/Director Detail

Date