

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N99000002692

**Entity Name:** COSTA BRAVA ASSOCIATION, INC.

**Current Principal Place of Business:**

1500 NW 89 CT  
SUITE #202  
DORAL, FL 33172

**Current Mailing Address:**

1500 NW 89 CT  
SUITE #202  
DORAL, FL 33172 US

**FEI Number:** 65-0922382

**Certificate of Status Desired:** No

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

ALFARO & FERNANDEZ  
5801 NW 151 ST # 305  
MIAMI LAKES, FL 33014 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 VILLEGAS, MARISOL  
Address 1500 NW 89 CT  
SUITE #202  
City-State-Zip: DORAL FL 33172

Title VP  
Name AZCOITIA, INES  
Address 1500 NW 89 CT  
SUITE #202  
City-State-Zip: DORAL FL 33172

Title TD  
Name HAIMES, SAYDA  
Address 1500 NW 89 CT  
SUITE #202  
City-State-Zip: DORAL FL 33172

Title D  
Name FARAH, KARINE  
Address 1500 NW 89 CT  
SUITE #202  
City-State-Zip: DORAL FL 33172

Title SECRETARY  
Name MARCELO, BALDA  
Address 1500 NW 89 CT  
SUITE #202  
City-State-Zip: DORAL FL 33172

*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:** MARISOL VILLEGAS

**PRESIDENT**

**12/26/2017**

Electronic Signature of Signing Officer/Director Detail

Date