## 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

**FILED** 

Dec 04, 2017

**Secretary of State** CC0655345849

Officer/Director Detail:

Title PD Title VΡ

AZCOITIA, MAITE FARAH, KARINE Name Name

1500 NW 89 CT Address 1500 NW 89 CT Address **SUITE #202** 

**SUITE #202** 

**DORAL FL 33172** City-State-Zip: DORAL FL 33172 City-State-Zip:

Title TD Title

VILLEGAS, MARISOL AZCOITIA, INES Name Name Address 1500 NW 89 CT Address 1500 NW 89 CT

> **SUITE #202 SUITE #202**

**DORAL FL 33172 DORAL FL 33172** City-State-Zip: City-State-Zip:

Title **SECRETARY** HAIMES, SAYDA Name

Address 1500 NW 89 CT

**SUITE #202** 

**DORAL FL 33172** City-State-Zip:

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.

12/04/2017 SIGNATURE: AZCOITIA, MAITE **PRESIDENT**