## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000075335

**Entity Name: BOYNTON BEACH 30 CORPORATION** 

**FILED** Apr 22, 2024 **Secretary of State** 9225771960CC

**Current Principal Place of Business:** 

1600 SAWGRASS CORPORATE PKWY SUITE 400

SUNRISE, FL 33323

## **Current Mailing Address:**

1600 SAWGRASS CORPORATE PKWY SUITE 400 SUNRISE, FL 33323 US

FEI Number: 87-2345720 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HELFMAN, STEVEN M ESQ 1600 SAWGRASS CORPORATE PKWY SUITE 400 SUNRISE, FL 33323 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail :

Title **PRESIDENT** Title VICE PRESIDENT, SECRETARY

EZRATTI, MISHA J FANT, ALAN J Name Name

1600 SAWGRASS CORPORATE PKWY 1600 SAWGRASS CORPORATE PKWY Address Address

SUITE 400 SUITE 400

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title VICE PRESIDENT Title VICE PRESIDENT, TREASURER

Name NORWALK, RICHARD M Name MENENDEZ, N. MARIA

1600 SAWGRASS CORPORATE PKWY 1600 SAWGRASS CORPORATE PKWY Address Address SUITE 400

SUITE 400

SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323 City-State-Zip:

Title VICE PRESIDENT Title VICE PRESIDENT Name DEPLAZA, MARCIE Name DIDONNA, JILL

Address 1600 SAWGRASS CORPORATE PKWY Address 1600 SAWGRASS CORPORATE PKWY

SUITE 400 SUITE 400

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

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 607, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.