

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004944

**FILED**  
**Jan 30, 2019**  
**Secretary of State**  
**8667210426CC**

**Entity Name:** CONDOMINIUM CONCEPTS MANAGEMENT, INC.

**Current Principal Place of Business:**

1200 LAKE HEARN DR  
SUITE 275  
ATLANTA, GA 30319

**Current Mailing Address:**

1200 LAKE HEARN DR  
SUITE 275  
ATLANTA, GA 30319 US

**FEI Number:** 01-0740856

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	VP	Title	PRESIDENT, DIRECTOR
Name	WALKER, DARLYS	Name	DIESTEL, DAVID
Address	1200 LAKE HEARN DR SUITE 275	Address	2950 N 28TH TERRACE
City-State-Zip:	ATLANTA GA 30319	City-State-Zip:	HOLLYWOOD FL 33020
Title	VP	Title	SECRETARY, TREASURER, DIRECTOR
Name	STOOPS, MARK	Name	PINEDA, LOURDES
Address	3400 PEACHTREE RD N.E. SUITE 1700	Address	2950 N 28TH TERRACE
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	HOLLYWOOD FL 33020
Title	DIRECTOR		
Name	NATALE, MICHAEL		
Address	1855 GRIFFIN RD, STE A-330		
City-State-Zip:	DANIA BEACH FL 33004		

*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.*

**SIGNATURE:** LOURDES PINEDA

**SECRETARY**

**01/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date