

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709822

**Entity Name:** 8000 CONDOMINIUM, INC.

**Current Principal Place of Business:**

8000 HARDING AVE  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

AVANTAGE PROPERTY MANAGEMENT  
1000 5TH STREET 1316  
MIAMI BEACH, FL 33139 US

**FEI Number:** 59-1148319

**Certificate of Status Desired:** No

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

AVANTAGE PROPERTY MANAGEMENT  
AVANTAGE PROPERTY MANAGEMENT  
1000 5TH STREET 1316  
MIAMI BEACH, FL 33139 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:** BELKIS MIRABAL

03/02/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name FUNARI, CHRISTOPHER  
Address 2135 S. MOLE STREET  
3D  
City-State-Zip: PHILADELPHIA PA 19145

Title VP  
Name NOBREGAS, MILLIN A  
Address 7440 HARDING AVE.  
405  
City-State-Zip: MIAMI BEACH FL 33141

Title LCAM  
Name MIRABAL, BELKIS  
Address AVANTAGE PROPERTY  
MANAGEMENT  
1000 5TH STREET 1316  
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR  
Name RODRIGUEZ, ISAAC  
Address C/O AVANTAGE PROPERTY  
MANAGEMENT  
1000 5TH STREET SUITE 1316  
City-State-Zip: MIAMI BEACH FL 33139

Title TREASURER  
Name PAEZ, GONZALO  
Address 10120 SW 129TH TERRACE  
City-State-Zip: MIAMI FL 33176

Title SECRETARY  
Name SALVADOR, MANUEL  
Address 16824 NW 49TH AVE.  
City-State-Zip: CAROL CITY FL 33055

Title PRESIDENT  
Name ROQUE , LAZARA  
Address AVANTAGE PROPERTY  
MANAGEMENT  
1000 5TH STREET 1316  
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR  
Name GARCIA, SANDRA  
Address 1000 5TH STREET  
SUITE 1316  
City-State-Zip: MIAMI BEACH FL 33139

*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:** BELKIS MIRABAL

LCAM

03/02/2022

Electronic Signature of Signing Officer/Director Detail

Date