

**2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 713304

Entity Name: FOURTH HORIZONS CONDOMINIUM INC.

Current Principal Place of Business:

1400 NE 191 ST.
NORTH MIAMI BEACH, FL 33179

Current Mailing Address:

1400 N.E. 191 STREET
OFFICE
NORTH MIAMI BEACH, FL 33179 US

FEI Number: 59-1226368

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTIN, CARLOS ESQ.
BECKER & POLIAKOFF, P.A.
121 ALHAMBRA PLAZA 10TH FLOOR
CORAL GABLES, FL 33134 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: CARLOS MARTIN, ESQ.

02/27/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MARMOR, MATTHEW P
Address 1400 N.E. 191ST STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name RELYZ, VANESSA
Address 1400 N.E. 191ST STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title VP
Name GARRUCHO, JOSE A
Address 1400 N.E. 191 STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title SECRETARY
Name JOHNSON, KAREN
Address 1400 N.E. 191ST STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title TREASURER
Name MONTERO, ORIEL
Address 1400 N.E 191ST STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name JOHNSON, ROBERT
Address 1400 N.E. 191ST STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title DIRECTOR
Name CARRILLO, ANYELI
Address 1400 N.E. 191ST STREET
City-State-Zip: NORTH MIAMI BEACH FL 33179

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: MATTHEW MARMOR

PRESIDENT

02/27/2015

Electronic Signature of Signing Officer/Director Detail

Date