

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719094

**FILED**  
**Jan 26, 2023**  
**Secretary of State**  
**3572210908CC****Entity Name:** CONDOMINIUM ASSOCIATION OF PLAZA TOWERS SOUTH, INC.**Current Principal Place of Business:**1849 S OCEAN DR  
HALLANDALE, FL 33009**Current Mailing Address:**1849 S OCEAN DR  
HALLANDALE, FL 33009**FEI Number:** 59-1355519**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHAPS, JULIA  
1849 S OCEAN DR  
UNIT 1501  
HALLANDALE, FL 33009 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:** JULIA SHAPS**01/26/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER  
Name            GAVRILOVA, LUDMILA  
Address        1849 S. OCEAN DRIVE # 1214  
City-State-Zip: HALLANDALE FL 33009

Title            PRESIDENT  
Name            KOUK, TATYANA  
Address        1849 S. OCEAN DR. # 312  
City-State-Zip: HALLANDALE FL 33009

Title            DIRECTOR  
Name            IRINA, ILIN  
Address        1849 S OCEAN DR # 1105  
City-State-Zip: HALLANDALE FL 33009

Title            DIRECTOR  
Name            BUCCIACCHIO, NEDO  
Address        1849 S OCEAN DRIVE # 215  
City-State-Zip: HALLANDALE FL 33009

Title            DIRECTOR  
Name            RUBINOV, ROMAN  
Address        1849 S OCEAN DR  
                 PH-9  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            DIRECTOR  
Name            KORYTNY, ARTUR  
Address        1849 S OCEAN DR  
                 APT 1015  
City-State-Zip: HALLANDALE FL 33009

Title            DIRECTOR  
Name            FRIDMAN, YAKOV  
Address        1849 S OCEAN DR  
                 APT # 1203  
City-State-Zip: HALLANDALE FL 33009

Title            VP  
Name            SHAPS, JULIA  
Address        1849 S OCEAN DR  
                 APT 1501  
City-State-Zip: HALLANDALE FL 33009

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*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:** TATYANA KOUK**PRESIDENT****01/26/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name MAMONOVA, MARINA  
Address 1849 S OCEAN DR  
# 1415  
City-State-Zip: HALLANDALE FL 33009

Title DIRECTOR  
Name GUERTIN, SUSANNE  
Address 1849 S. OCEAN DRIVE  
# 415  
City-State-Zip: HALLANDALE FL 33009

Title DIRECTOR  
Name ROSINSKY, DANIEL  
Address 1849 S OCEAN DR  
APT 1210  
City-State-Zip: HALLANDALE FL 33009