

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720529

**Entity Name:** GABLES HARBOUR CONDOMINIUM APARTMENTS ASSOCIATION, INC.

**FILED**  
**Jun 27, 2017**  
**Secretary of State**  
**CC7481508929**

**Current Principal Place of Business:**

6901 E EDGEWATER DR  
CORAL GABLES, FL 33133

**Current Mailing Address:**

C/O BONAFIDE MANAGEMENT GROUP, INC.  
P.O. BOX 521458  
MIAMI, FL 33152 US

**FEI Number: 59-1991021**

**Certificate of Status Desired: No**

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

DE LA CAMARA, ROSA ESQ.  
C/O 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: ROSA DE LA CAMARA**

**06/27/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            PORTAS, ED  
Address        6901 EDGEWATER DR  
                  328  
City-State-Zip: CORAL GABLES FL 33133

Title            VP, DIRECTOR  
Name            MOURIZ, MIGUEL  
Address        6901 EDGEWATER DR  
                  315  
City-State-Zip: CORAL GABLES FL 33133

Title            TREASURER, DIRECTOR  
Name            BESSERER, JOHANN  
Address        6901 EDGEWATER DRIVE  
                  313  
City-State-Zip: CORAL GABLES FL 33133

Title            SECRETARY, DIRECTOR  
Name            RODRIGUEZ, ROBERT  
Address        6901 EDGEWATER DR  
                  314  
City-State-Zip: CORAL GABLES FL 33133

*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: JOHANN BESSERER**

**SECRETARY-DIRECTOR**

**06/27/2017**

Electronic Signature of Signing Officer/Director Detail

Date