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

#### **DOCUMENT# 752824**

Entity Name: CORAL REEF MEDICAL PARK II CONDOMINIUM ASSOCIATION, INC.

## **Current Principal Place of Business:**

9275 SW 152 ST SUITE 208 MIAMI, FL 33157

# **Current Mailing Address:**

9275 SW 152 STREET SUITE 208 MIAMI, FL 33157 US

## FEI Number: 59-2136629

## Name and Address of Current Registered Agent:

SANCETTA, RONALD 9275 SW. 152 STREET SUITE 208 MIAMI, FL 33157 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

## Officer/Director Detail :

City-State-Zip: MIAMI FL 33157

|  | Title           | Ρ                                   | Title           | SECRETARY, TREASURER            |
|--|-----------------|-------------------------------------|-----------------|---------------------------------|
|  | Name            | MABJEESH, MARY                      | Name            | FEANNY, ELIAS DR.               |
|  | Address         | 9275 SOUTHWEST 152ND STREET<br>#206 | Address         | 9275 SW 152 STREET<br>SUITE 101 |
|  | City-State-Zip: | MIAMI FL 33157                      | City-State-Zip: | MIAMI FL 33157                  |
|  | Title           | VP                                  |                 |                                 |
|  | ritte           | VP                                  |                 |                                 |
|  | Name            | SANCETTA, RONALD DR.                |                 |                                 |
|  | Address         | 9275 SW 152 ST<br>SUITE 208         |                 |                                 |
|  |                 |                                     |                 |                                 |

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.

PRESIDENT

#### SIGNATURE: MARY MABJEESH

Electronic Signature of Signing Officer/Director Detail

# FILED Jan 20, 2023 Secretary of State 3886759432CC

Certificate of Status Desired: No

01/20/2023 Date

Date