

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008091

**FILED  
Apr 01, 2019  
Secretary of State  
7079323028CC**

**Entity Name:** HIALEAH GARDENS INDUSTRIAL PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12901 N OKEECHOBEE RD  
#F11  
HIALEAH GARDENS, FL 33018

**Current Mailing Address:**

P.O. BOX 126605  
HIALEAH, FL 33012

**FEI Number: 02-0549835**

**Certificate of Status Desired: No**

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

EISINGER BROWN LEWIS FRANKEL & CHAIET, PA  
ATTN: DENNIS J. EISINGER  
4000 HOLLYWOOD BLVD., SUITE 265-S  
HOLLYWOOD, FL 33021 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PROPERTY MANAGER  
Name FONT DE LA TORRE, NANCY  
Address 12901 N OKEECHOBEE RD  
#F11  
City-State-Zip: HIALEAH GARDENS FL 33018

Title DP  
Name MONTOYA, LISBER F  
Address 12949 N OKEECHOBEE RD #C2  
City-State-Zip: HIALEAH GARDENS FL 33018

Title SECRETARY  
Name KREFFT, NURIAN  
Address 13356 SW 52 STREET  
City-State-Zip: MIRAMAR FL 33027

Title DT  
Name BENITEZ GARCIA, ADOLFO  
Address 12951 W OKEECHOBEE RD.  
City-State-Zip: HIALEAH GARDENS FL 33018

*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: NANCY FONT DE LA TORRE**

**MANAGER**

**04/01/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date