

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N02000005844

**Entity Name:** M RESORT RESIDENCES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

18683 COLLINS AVE  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

18683 COLLINS AVE  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 20-1792762

**Certificate of Status Desired:** No

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

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
SUITE C-207  
FORT LAUDERDALE, FL 33312 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:** CHARLES F. OTTO, ESQ.

07/10/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, DIRECTOR  
Name TAWIL, ANDRES  
Address 18683 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title PRESIDENT, DIRECTOR  
Name GARDNER, LISA  
Address 18683 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title TREASURER, DIRECTOR  
Name MASOUD, ANISA  
Address 18683 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title VP, DIRECTOR  
Name FRIEDMAN, CORY  
Address 18683 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title DIRECTOR  
Name NAVARRO, GLORIA ELENA  
Address 18683 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** LISA GARDNER

**PRESIDENT**

07/10/2024

Electronic Signature of Signing Officer/Director Detail

Date