

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009642

**Entity Name:** KENDALL COMMERCE CENTER ASSOCIATION CORP.

**Current Principal Place of Business:**

12355 SW 129 CT, UNIT 7 & 8  
MIAMI, FL 33186

**Current Mailing Address:**

C/O APM OF FLORIDA, LLC  
12360 SW 132ND CT SUITE 108  
MIAMI, FL 33186 US

**FEI Number:** 20-0211630

**Certificate of Status Desired:** No

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

ASSOCIATED PROPERTY MANAGERS OF FL, LLC  
12360 SW 132ND CT  
SUITE 108  
MIAMI , FL 33186 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 PD  
Name TOWER, MAXIMILLIAN  
Address 12355 SW 129 CT, UNIT 7 &8  
City-State-Zip: MIAMI FL 33186

Title TD  
Name CARBONEL, ALFREDO  
Address 12355 SW 129 CT, UNIT 4  
City-State-Zip: MIAMI FL 33186

Title SEC  
Name SALAS, JOSE R  
Address 12385 SW 129 CT, #13  
City-State-Zip: MIAMI FL 33186

*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:** MAXIMILLIAN TOWER

**PRESIDENT**

**01/20/2015**

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

\_\_\_\_\_  
Date