2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000949

Entity Name: THE ASTON CONDOMINIUM ASSOCIATION, INC.

FILED Feb 12, 2024 **Secretary of State** 6168417990CC

Current Principal Place of Business:

3000 SW 22ND STREET - SUITE #100

MIAMI, FL 33145

Current Mailing Address:

3000 SW 22ND STREET - SUITE #100 MIAMI, FL 33145 US

FEI Number: 05-0574201 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AYALA, ONDINA 3000 CORAL WAY MIAMI, FL 33145 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title **TREASURER** Title **SECRETARY**

JI, XIAOJIN MONIQUE, GRACIOTTI Name Name

Address 3001 SW 22 TER Address 3000 SW 22ND STREET #TH03

UNIT 404

City-State-Zip: CORAL GABLES FL 33145 City-State-Zip: MIAMI FL 33145

Title **PRESIDENT** Title VΡ

Name KUREY, MICHAEL Name STRAUSS, MICHAEL

3000 SW 22ND STREET 3000 SW 22ND STREET Address Address **UNIT 814 UNIT 516**

Title **BOARD MEMBER** Title **BOARD MEMBER**

Name CARDONNE, ODILIA Name MARSICANO, LAUREN ESQ.

City-State-Zip:

MIAMI FL 33145

Address 3000 SW 22 STREET Address 3000 SW 22 STREET

UNIT 1013 UNIT 1205

City-State-Zip: MIAMI FL 33145 City-State-Zip: MIAMI FL 33145

Title **BOARD MEMBER** ARIAS, ALFREDO Name

3000 SW 22ND STREET Address **UNIT 414**

MIAMI FL 33145 City-State-Zip:

MIAMI FL 33145

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.

02/12/2024 SIGNATURE: MICHAEL KUREY **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date