

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006974

Entity Name: PARK PLACE LATIN CLUB, INC.**Current Principal Place of Business:**1000 SAINT CHARLES PL
STE. 515
PEMBROKE PINES, FL 33026**Current Mailing Address:**1000 SAINT CHARLES PLACE
APT. # 515
PEMBROKE PINES, FL 33026 US**FEI Number: 51-0549043****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHAVES, BERNICE
1200 SAINT CHARLES PL - APT. 403
PEMBROKE PINES, FL 33026 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	PRESIDENT
Name	GORDILLO, FELIX GENARO
Address	1300 SAINT CHARLES PL STE. 416
City-State-Zip:	PEMBROKE PINES FL 33026

Title	D
Name	VILLEGAS, RUBY
Address	1100 SAINT CHARLES PL - APT. 416
City-State-Zip:	PEMBROKE PINES FL 33026

Title	SECRETARY
Name	ESCOBAR, MARLENE
Address	900 SAINT CHARLES PLACE APT. # 408
City-State-Zip:	PEMBROKE PINES FL 33026

Title	TREASURER
Name	NAVARRO, GONZALO
Address	1000 SAINT CHARLES PL - APT. 515
City-State-Zip:	PEMBROKE PINES FL 33026
Title	VP
Name	CHAVES, BERNICE
Address	1200 SAINT CHARLES PL - APT. 403
City-State-Zip:	PEMBROKE PINES FL 33026

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: GONZALO NAVARRO**TREASURER****08/24/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date