

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010134

Entity Name: ROYAL PALM BUSINESS PLAZA CONDOMINIUM
ASSOCIATION, INC.**FILED**
Mar 11, 2024
Secretary of State
5526288452CC**Current Principal Place of Business:**C/O RAMY GALI
9100 BELVEDERE RD STE 105
ROYAL PALM BEACH, FL 33411**Current Mailing Address:**C/O RAMY GALI
9100 BELVEDERE RD STE 105
ROYAL PALM BEACH, FL 33411 US**FEI Number: 20-8042702****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LIBERMAN & ASSOCIATES PA
9100 BELVEDERE RD
STE 211
ROYAL PALM BEACH, FL 33411 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: LEA LIBERMAN****03/11/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** V
Name SABAN, JOE
Address 2537 WEST ST.
City-State-Zip: BROOKLYN NY 11223**Title** P
Name GALI, RAMY DR.
Address 9100 BELVEDERE RD
105
City-State-Zip: ROYAL PALM BEACH FL 33411**Title** T
Name LIBERMAN, LEA
Address 9100 BELVEDERE RD
STE 211
City-State-Zip: ROYAL PALM BEACH FL 33411**Title** S
Name GERARDI, KRISTINA
Address 9200 BELVEDERE RD
SUITE 102
City-State-Zip: ROYAL PALM BEACH FL 33411**Title** D
Name BURROWS, PETER
Address 9200 BELVEDERE RD
SUITE 208
City-State-Zip: ROYAL PALM BEACH FL 33411

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: LEA LIBERMAN**TREASURER****03/11/2024**

Electronic Signature of Signing Officer/Director Detail

Date