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: NITZA GONZALEZ

Electronic Signature of Signing Officer/Director Detail

SECRETARY-TREASURER 01/18/2018

205 MIAMI, FL 3	33134 US			
The above na	med entity submits this statement for the purpose of	changing its registered office or re	gistered agent, or both, in the State of Flor	
SIGNATU	RE: MANUEL A. LARRIEU	MANUEL A. LARRIEU		
	Electronic Signature of Registered Age	nt		
Officer/Di	irector Detail :			
Title	DIRECTOR, VP	Title	DIRECTOR, PRESIDENT	
Name	LARRIEU, JORGE	Name	LARRIEU, MANUEL A.	
Address	3971 SW 8 STREET	Address	3971 SW 8 STREET	

205 MIAMI, FL 33134

3971 SW 8 ST.

Current Mailing Address:

Current Principal Place of Business:

3971 SW 8 STREET 205 MIAMI, FL 33134 US

FEI Number: 59-2494919

SUITE 205

DIRECTOR

205

MIAMI FL 33134

GONZALEZ, NITZA

3971 SW 8 STREET

MIAMI FL 33134

SECRETARY, TREASURER,

Name and Address of Current Registered Agent:

LARRIEU, MANUEL A 3971 SW 8 STREET

City-State-Zip:

Title

Name

Address

City-State-Zip:

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05200

Entity Name: SALZEDO OFFICE CONDOMINIUM ASSOCIATION, INC.

SUITE 205

MIAMI FL 33134

City-State-Zip:

Certificate of Status Desired: No

Date

FILED Jan 18, 2018 Secretary of State CC1324743056

01/18/2018 Date