

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N06000002210

Entity Name: PORTOFINO PROFESSIONAL CENTER CONDOMINIUM
ASSOCIATION, INC.

Current Principal Place of Business:

925 NE 30 TERRACE
HOMESTEAD, FL 33033

Current Mailing Address:

C/O ALTON MADISON PROP MGMT
381 N KROME AVENUE SUITE 205
HOMESTEAD, FL 33030 US

FEI Number: 20-5620829

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKRLD, INC
201 ALHAMBRA CIRCLE
11 FLOOR
CORAL GABLES, FL 33134 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: MARIA V. ARIAS

10/23/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name DAE, HOSAIN DR.
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name MURTHY, HALLEGERE DR
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title TD
Name LOPEZ LUCIANO, LUISA DR.
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title VP
Name SEGAL, JAMES DR.
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title SD
Name VAZQUEZ, NIVIA DR.
Address 381 N KROME AVENUE, SUITE 205
City-State-Zip: HOMESTEAD FL 33030

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: DR HOSAIN DAE

P

10/23/2013

Electronic Signature of Signing Officer/Director Detail

Date