Current Prin 1445 16TH STF MIAMI BEACH,			CC965	9933915
Current Mai	ling Address:			
1445 16TH S MIAMI BEAG	STREET CH, FL 33139			
FEI Number: 26-2761871		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
SKRLD, INC. ATTN: GARY MARS 201 ALHAMBRA CIRCLE, 11TH FLOOR MIAMI, FL 33134 US				
The above name	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of F	lorida.
	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of F	ilorida. 01/02/2015
		stered office or regis	tered agent, or both, in the State of F	
	Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of F	01/02/2015
SIGNATURE	Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of F	01/02/2015
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent			01/02/2015
SIGNATURE Officer/Dire	Electronic Signature of Registered Agent Ctor Detail : DP	Title	DV	01/02/2015
SIGNATURE Officer/Dire Title Name	Electronic Signature of Registered Agent Ctor Detail : DP SILVERMAN, JEFFREY L 1445 16TH STREET	Title Name	DV MILLMAN, JULES 1445 16TH STREET	01/02/2015
SIGNATURE Officer/Dire Title Name Address	Electronic Signature of Registered Agent Ctor Detail : DP SILVERMAN, JEFFREY L 1445 16TH STREET	Title Name Address	DV MILLMAN, JULES 1445 16TH STREET	01/02/2015
SIGNATURE Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent Ctor Detail : DP SILVERMAN, JEFFREY L 1445 16TH STREET MIAMI BEACH FL 33139	Title Name Address	DV MILLMAN, JULES 1445 16TH STREET	01/02/2015

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: CAPRI SOUTH BEACH CONDOMINIUM ASSOCIATION, INC.

City-State-Zip: MIAMI BEACH FL 33139

DOCUMENT# N08000005440

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: LOUIS COSTANZO

Electronic Signature of Signing Officer/Director Detail

SECRETARY

01/02/2015 Date

FILED Jan 02, 2015

Secretary of State

CC9659933915