

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N10000009318

**Entity Name:** 63 NOBE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6305 INDIAN CREEK DR  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

1234 WASHINGTON AVE  
SUITE 200  
MIAMI BEACH, FL 33139 US

**FEI Number:** 27-3711867

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GONGORA , MICHAEL  
BECKER & POLIAKOFF  
ALHAMBRA TOWERS| 121 ALHAMBRA PLAZA 10 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:** GONGORA MICHAEL

08/16/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SHEPARD, GREGORY  
Address        1234 WASHINGTON AVE  
                  SUITE 200  
City-State-Zip: MIAMI BEACH FL 33139

Title            TREASURER  
Name            AZNAR, FLOR DOCTOR  
Address        1234 WASHINGTON AVE  
                  SUITE 200  
City-State-Zip: MIAMI BEACH FL 33139

Title            MANAGER  
Name            SCHAPIRO, DANIEL  
Address        1234 WASHINGTON AVE  
                  SUITE 200  
City-State-Zip: MIAMI BEACH FL 33139

Title            VP  
Name            COLALUCA, STEVEN  
Address        1234 WASHINGTON AVENUE  
                  SUITE 200  
City-State-Zip: MIAMI BEACH FL 33139

Title            SECRETARY  
Name            GAGLIANO, LOUIS  
Address        1234 WASHINGTON AVE  
                  SUITE 200  
City-State-Zip: MIAMI BEACH FL 33139

Title            DIRECTOR  
Name            KING, DAVE  
Address        1234 WASHINGTON AVE  
                  SUITE 200  
City-State-Zip: MIAMI BEACH FL 33139

*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:** SHEPARD GREGORY

PRESIDENT

08/16/2021

Electronic Signature of Signing Officer/Director Detail

Date