

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N15000000294

Entity Name: MIDTOWN DORAL MASTER ASSOCIATION, INC.

FILED
Dec 12, 2019
Secretary of State
9439057579CC

Current Principal Place of Business:

7875 NW 107 AVE
MIDTOWN DORAL CONDOMINIUM 4 MANAGEMENT OFFICE
DORAL, FL 33178

Current Mailing Address:

7875 NW 107 AVE
MIDTOWN DORAL CONDOMINIUM 4 MANAGEMENT OFFICE
DORAL, FL 33178 US

FEI Number: 47-5486052

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ACUÑA, ALBERT E. ESQ.
782 NW 42 AVE STE 343
MIAMI, FL 33126 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: ALBERT E. ACUÑA

12/12/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PASTOR, NANCY
Address 7875 NW 107 AVE
 MIDTOWN DORAL CONDOMINIUM 4
 MANAGEMENT OFFICE
City-State-Zip: DORAL FL 33178

Title VP
Name DAVILA, JUAN C.
Address 7875 NW 107 AVE
 MIDTOWN DORAL CONDOMINIUM 4
 MANAGEMENT OFFICE
City-State-Zip: DORAL FL 33178

Title SECRETARY
Name LOZANO, WILLIAM
Address 7875 NW 107 AVE
 MIDTOWN DORAL CONDOMINIUM 4
 MANAGEMENT OFFICE
City-State-Zip: DORAL FL 33178

Title TREASURER
Name PEREIRA, JOSELINE
Address 7875 NW 107 AVE
 MIDTOWN DORAL CONDOMINIUM 4
 MANAGEMENT OFFICE
City-State-Zip: DORAL FL 33178

Title DIRECTOR
Name DE GRAZIA, HORACIO
Address 7875 NW 107 AVE
 MIDTOWN DORAL CONDOMINIUM 4
 MANAGEMENT OFFICE
City-State-Zip: DORAL FL 33178

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: NANCY PASTOR

PRESIDENT

12/12/2019

Electronic Signature of Signing Officer/Director Detail

Date