

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

DOCUMENT# N15000000294

**Entity Name:** MIDTOWN DORAL MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

7751 NW 107 AVENUE  
DORAL, FL 33178

**FILED**  
**Mar 15, 2021**  
**Secretary of State**  
**3723421543CC**

**Current Mailing Address:**

3934 SW 8TH STREET  
SUITE 303  
CORAL GABLES , FL 33134 US

**FEI Number:** 47-5486052

**Certificate of Status Desired:** No

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

ACUNA, ALBERT E. ESQ.  
782 NW 42 AVE STE 350  
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

03/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PASTOR, NANCY  
Address        3934 SW 8TH STREET  
                  SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

Title            VP  
Name            DAVILA, JUAN C.  
Address        3934 SW 8TH STREET  
                  SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

Title            SECRETARY  
Name            RODRIGUEZ, BRYAN  
Address        3934 SW 8TH STREET  
                  SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

Title            TREASURER  
Name            PEREIRA, JOSELINE  
Address        3934 SW 8TH STREET  
                  SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

Title            DIRECTOR  
Name            LARKIN, JEREMY  
Address        3934 SW 8TH STREET  
                  SUITE 303  
City-State-Zip: CORAL GABLES FL 33134

*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

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date