

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15065

**Entity Name:** CARMEL TOWNHOMES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1241 W 12 LN  
HIALEAH, FL 33016**Current Mailing Address:**PO BOX 160698  
HIALEAH, FL 33016 US**FEI Number:** 59-2620154**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRANK PEREZ-SIAM, P.A.  
7001 SW 87TH COURT  
MIAMI, , FL 33173 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:** FRANK PEREZ-SIAM,

02/04/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SANTOS, EDGARDO  
Address PO BOX 160698  
City-State-Zip: HIALEAH FL 33016

Title TREASURER  
Name LEIVA, ALEXY S  
Address PO BOX 160698  
City-State-Zip: HIALEAH FL 33016

Title DIRECTOR  
Name RAMIREZ CASTRO, PEDRO I  
Address PO BOX 160698  
City-State-Zip: HIALEAH FL 33016

Title PRESIDENT  
Name MEDRANO, MARIA J  
Address PO BOX 160698  
City-State-Zip: HIALEAH FL 33016

Title SECRETARY  
Name CALZADILLA JR, LUIS  
Address PO BOX 160698  
City-State-Zip: HIALEAH FL 33016

Title DIRECTOR  
Name LOPEZ, ELSA  
Address PO BOX 160698  
City-State-Zip: HIALEAH FL 33016

Title VP  
Name RAMIREZ, RENE N  
Address PO BOX 160698  
City-State-Zip: HIALEAH FL 33016

*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:** LEIVA , ALEXY S

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02/04/2025

Electronic Signature of Signing Officer/Director Detail

Date