

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000000843

Entity Name: AVENTURA PARKSQUARE PROPERTY OWNERS' ASSOCIATION, INC**Current Principal Place of Business:**2950 NE 207TH STREET
AVENTURA , FL 33180**Current Mailing Address:**355 ALHAMBRA CIRCLE, SUITE 1101
CORAL GABLES, FL 33134 US**FEI Number: 82-2511770****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HALPERN RODRIGUEZ LLP
355 ALHAMBRA CIRCLE, SUITE 1101
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:** MARC A. HALPERN**02/10/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CHANG, LOURDES ALEXANDRA
Address 2980 NE 207TH STREET
 SUITE 603
City-State-Zip: AVENTURA FL 33180

Title TREASURER
Name KANOV, SEAN
Address 15807 BISCAYNE BLVD
 SUITE #105
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title DIRECTOR
Name WHITE, LILIANA
Address 2920 NE 207TH STREET
 SUITE #901-910
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name ZILBERMAN, JESSE
Address 2960 NE 207TH STREET
 UNIT #1201
City-State-Zip: AVENTURA FL 33180

Title VP
Name WIKSE, JONATHAN
Address 2910 NE 207 ST
City-State-Zip: AVENTURA FL 33180

Title SECRETARY
Name QUESADA, JOSE
Address 2980 NE 207TH STREET
 SUITE 603
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name LECHTER, ROBERT
Address 2980 NE 207TH STREET
 SUITE#706
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name BEHAR, JOSHUA
Address 2980 NE 207TH STREET
 SUITE 603
City-State-Zip: AVENTURA FL 33180

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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: JOSE QUESADA**SECRETARY****02/10/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LEONOFF, HERNAN
Address	2980 NE 207TH STREET SUITE 603
City-State-Zip:	AVENTURA FL 33180