

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000006137

**FILED**  
**Apr 17, 2019**  
**Secretary of State**  
**0715533657CC**

**Entity Name:** AVENTURA PARKSQUARE MEDICAL OFFICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2920 NE 207TH STREET,  
AVENTURA, FL 33180

**Current Mailing Address:**

1200 BRICKELL AVE, PH2000  
MIAMI, FL 33131 US

**FEI Number: 82-1844398**

**Certificate of Status Desired: No**

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

ASSOCIATION LAW GROUP  
1200 BRICKELL AVE, PH2000  
MIAMI, FL 33131-2130 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: JEFF COOPERMAN

04/17/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WHITE, LILIANA  
Address        2960 NE 207TH STREET SUITE OFC  
City-State-Zip: AVENTURA FL 33180

Title            VP  
Name            GIRALDO, CESAR  
Address        2960 NE 207TH STREET SUITE OFC  
City-State-Zip: AVENTURA FL 33180

Title            TREASURER, SECRETARY  
Name            DIAZ, GABRIEL  
Address        2960 NE 207TH STREET SUITE OFC  
City-State-Zip: AVENTURA FL 33180

*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: LILIANA WHITE

PRESIDENT

04/17/2019

Electronic Signature of Signing Officer/Director Detail

Date