

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000012343

**FILED**  
**May 01, 2023**  
**Secretary of State**  
**8530492505CC**

**Entity Name:** 18700-18702 SW 316 TERRACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

33 SW 2ND AVENUE, SUITE 401  
MIAMI, FL 33130

**Current Mailing Address:**

33 SW 2ND AVENUE, SUITE 401  
MIAMI, FL 33130 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

SALIM CHRAIBI  
33 SW 2ND AVENUE, SUITE 401  
MIAMI, FL 33130 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PD  
Name SALIM CHRAIBI  
Address 33 SW 2ND AVENUE, SUITE 401  
City-State-Zip: MIAMI FL 33130

Title VPD  
Name KASMIL CHRAIBI  
Address 33 SW 2ND AVENUE, SUITE 401  
City-State-Zip: MIAMI FL 33130

Title STD  
Name MOISES GONZALEZ  
Address 33 SW 2ND AVENUE, SUITE 401  
City-State-Zip: MIAMI FL 33130

*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: CHRABI SALIM

PD

05/01/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date