

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28693

**Entity Name:** GABLES SOUTH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5750 TURIN STREET  
CORAL GABLES, FL 33146

**Current Mailing Address:**

5750 TURIN STREET  
CORAL GABLES, FL 33146

**FEI Number: 65-0239615**

**Certificate of Status Desired: No**

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

CHIALASTRI, CARLOS  
TRIZEL CRE  
2460 SW 22 ST  
MIAMI, FL 33145 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:** CARLOS CHIALASTRI

02/13/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HERNANDEZ, JULIANA A  
Address        1116 ANDORA AVE  
City-State-Zip: CORAL GABLES FL 33146

Title            VP  
Name            SANCHEZ, MELISSA  
Address        5750 TURIN STREET  
                  UNIT 101  
City-State-Zip: CORAL GABLES FL 33146

Title            SECRETARY  
Name            MILLARES, RAFAEL  
Address        5750 TURIN STREET  
                  UNIT 206  
City-State-Zip: CORAL GABLES FL 33146

Title            TREASURER  
Name            ABREU, LIZA  
Address        5750 TURIN STREET  
                  UNIT 106  
City-State-Zip: CORAL GABLES FL 33146

Title            OFFICER  
Name            CUETER, PATRICIA  
Address        6703 SW 130 TERRACE  
City-State-Zip: PINECREST FL 33156

*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:** HERNANDEZ , JULIANA A

PRESIDENT

02/13/2024

Electronic Signature of Signing Officer/Director Detail

Date