### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41511

Entity Name: THE FLAMINGO PLAZA CONDOMINIUM ASSOCIATION, INC.

**FILED** Apr 30, 2022 **Secretary of State** 4124598773CC

## **Current Principal Place of Business:**

1051 MERIDIAN AVE. MIAMI BEACH, FL 33139

## **Current Mailing Address:**

C/O MQM 1370 WASHINGTON AVE STE 207 MIAMI BEACH, FL 33139 US

FEI Number: 65-0240354 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MIAMI QUALITY MANAGEMENT MIAMI QUALITY MANAGEMENT PO BOX 191042 MIAMI BEACH, FL 33119 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: ANDREA VELAZQUEZ 04/30/2022

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title	DIRECTOR, ASST. SECRETARY	Title	TREASURER, DIRECTOR
Name	DENUCCIO, SALVATORE	Name	PESCE, DESIREE
Address	1370 WASHINGTON AVE 207	Address	1370 WASHINGTON AVE 207
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139
Title	SECRETARY, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	KROPA, GLORIA	Name	POUEYMIROU, FRANK
Address	1370 WASHINGTON AVE 207	Address	1370 WASHINGTON AVE 207
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139
Title	VP, DIRECTOR	Title	LCAM

RHODES, JOHN VELAZQUEZ, ANDREA Address 1370 WASHINGTON AVE Address PO BOX 191042

Name

City-State-Zip: MIAMI BEACH FL 33139 City-State-Zip: MIAMI BEACH FL 33119

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.

Name

SIGNATURE: ANDREA VELAZQUEZ

**LCAM** 

04/30/2022