| DOCUMENT# N43797 | Mai |
|--|----------------|
| Entity Name: MYSTIC POINTE TOWER 600 CONDOMINIUM ASSOCIATION, INC. | Secret 6860 |
| Current Principal Place of Business: | |
| 3400 NE 192ND ST AVENTURA, FL 33180 | |

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Mailing Address:

3400 NE 192ND ST AVENTURA, FL 33180

FEI Number: 65-0276144

Name and Address of Current Registered Agent:

SIEGFRIED RIVERA, INC. 201 ALHAMBRA CIR 1102 MIAMI, FL 33134 US

Certificate of Status Desired: No

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 | SONNY LEVITT | | | 03/12/2019 |
|-----------------|--|-----------------|--------------------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Dired | ctor Detail : | | | |
| Title | DIRECTOR | Title | PRESIDENT | |
| Name | SCHWIMMER, RICARDO | Name | SONNY , LEVITT | |
| Address | 3400 NE 192ND ST | Address | 3400 NE 192ND ST. # 708 | |
| City-State-Zip: | # 502 AVENTURA FL 33180 | City-State-Zip: | AVENTURA FL 33180 | |
| Title | SECRETARY | Title | TREASURER | |
| Name | BERGGRUN, POLA | Name | SANCHEZ, JULIO | |
| Address | 3400 NE 192ND ST. #1406 | Address | 3400 NE 192ND STREET #1804 | |
| City-State-Zip: | AVENTURA FL 33180 | City-State-Zip: | AVENTURA FL 33180 | |
| Title | DIRECTOR | Title | VP | |
| Name | PERLMAN, FRED | Name | LEVY, CORI | |
| Address | 3400 NE 192ND ST. # 401 | Address | 3400 N.E. 192ND STREET #904 | |
| City-State-Zip: | AVENTURA FL 33180 | City-State-Zip: | AVENTURA FL 33180 | |
| Title | DIRECTOR | | | |
| Name | VON KRAULAND, DANIELA | | | |
| Address | 3400 NE 192ND ST PH-10 | | | |
| 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: SONNY LEVITT

PRESIDENT

03/12/2019

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 12, 2019 etary of State 0974346CC