

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000005458

**Entity Name:** CARIBBEAN WAREHOUSE CENTER CONDOMINIUM  
ASSOCIATION INC.**Current Principal Place of Business:**6905-41 N.W. 52 STREET  
MIAMI, FL 33166**Current Mailing Address:**MP PROPERTY MGMT  
PO BOX 667808  
MIAMI, FL 33166**FEI Number: 65-1153721****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MP PROPERTY MANAGEMENT  
8240 NW 52 TERRACE  
SUITE 204  
DORAL, FL 33166 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	PRESIDENT
Name	TORMES, FRANCISCO
Address	6913 NW 52 STREET
City-State-Zip:	MIAMI FL 33166

Title	TREASURER
Name	MONSANTE, ARTURO
Address	6941 NW 52 ST
City-State-Zip:	MIAMI FL 33166

Title	SECRETARY
Name	BEHAR, SARA
Address	6929 NW 52 ST
City-State-Zip:	MIAMI FL 33166

Title	VP
Name	FERNANDEZ, FLORENTINO
Address	6937 NW 52 STREET
City-State-Zip:	MIAMI FL 33166

Title	VP
Name	PIÑEIRO, FELIPE
Address	6917 NW 52 STREET
City-State-Zip:	MIAMI FL 33166

*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: FRANCISCO TORMES****PRESIDENT****01/12/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date