

**2026 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N01000007125

Entity Name: CENTURY PARK CONDOMINIUM NO. 2 ASSOCIATION, INC.

Current Principal Place of Business:

8950 W. FLAGLER STREET
MIAMI, FL 33174

Current Mailing Address:

300 ARAGON AVENUE
SUITE 370
CORAL GABLES, FL 33134 US

FEI Number: 65-1156272

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATHEW ESTEVEZ, P.A.
9600 NW 25TH STREET - STE. 2A
DORAL, FL 33172 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: MATHEW ESTEVEZ

08/20/2026

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name COSTA, ANTONIO C
Address 8924 W FLAGLER STREET
 #3
City-State-Zip: MIAMI FL 33174

Title SD
Name GONZALEZ BORGES, LUIS A
Address 300 ARAGON AVENUE
 370
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER
Name VALDES, DAVID
Address 8862 W. FLAGLER STREET
 #14
City-State-Zip: MIAMI FL 33174

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: ANTONIO C. COSTA

P

08/20/2026

Electronic Signature of Signing Officer/Director Detail

Date

Payment Receipt Confirmation

Your payment was successfully processed.

Transaction Summary

Receipt Confirmation

Description	Amount
Total Payment To Division of Corporations	\$61.25
Service Fee	\$0.00
Total Amount Paid	\$61.25

Transaction Detail

SKU	Description	Unit Price	Quantity	Amount
3066571217CC N01000007125	Annual Report Filing	\$61.25	1	\$61.25
	Service Fee	\$0.00		\$0.00
Total Amount Paid				\$61.25

Customer Information

Customer Name	Matthew Estevez	Receipt Date	8/20/2026
Local Reference ID	3066571217CC N01000007125	Receipt Time	04:17:03 PM EDT

Payment Information

Payment Type	Credit Card	Credit Card Number	*****7132
Credit Card Type	MAST	Order ID	291980946
		Name on Credit Card	Matthew Estevez

Billing Information

Billing Address	2885 Sanford Ave SW
Address 2	PMB 40397
Billing City, State	Grandville, MI
Billing Zip/Postal Code	49418
Country	US

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