

CAPITAL PROJECTS FORM



Department of Regulatory and Economic Resources
Consumer Protection Division
601 NW 1st Court, 18th Floor
Miami, FL 33136
Tel (786) 469-2300 Fax (786) 469-2311
CPRreg@miamidade.gov

Community Association Registration

Community Association Name: PARKWOOD CONDOMINIUM ASSOCIATION, INC.

Address: 9240 Fontainebleau Blvd, Miami, FL 33172

Telephone: 305-715-2801 Fax: 305-715-2802 Email: csr01@apmsi.com

Legal name of individual submitting this form: Joaquin Alvarez

Title: Property Manager Telephone: 786-317-7091 Email: jlvarez@apmsi.com

I, JOAQUIN ALVAREZ, certify that the above-named Community Association has a Planned Capital Project for calendar year 2024. The Planned Capital Project is as follows: *(1 form per project)*

☐ Type of Project: 50 year recertification

☐ Actual commencement date: February 2025 Completion date: December 2025

☐ Total Costs of project: \$1,797,350.00

☐ Source of Funding: special assessment

☐ Project Schedule: Start February end December 2025

☐ Additional information regarding project *(Attach a separate sheet as necessary)*:

Work that will be done: Roofs, Paint, Concrete restoration

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By submitting this form, I understand that whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in Florida Statutes.

JOAQUIN ALVAREZ

Signature

1 / 22 / 2025
Date

By submitting this form, I declare, under penalties of perjury, that I have read the foregoing form, that the facts stated in it are true, and that any supporting documents I submit are copies of genuine documents.

JOAQUIN ALVAREZ

Signature

1 / 22 / 2025
Date

By submitting this registration form, I understand this registration and any supporting documents are public record and are available for public inspection and copying.

JOAQUIN ALVAREZ

Signature

1 / 22 / 2025
Date

Last Updated 12/27/2023