

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000002676

**Entity Name:** ALAFA EDITIONS, INC.

**Current Principal Place of Business:**

1 ALHAMBRA PLAZA  
SUITE 1410  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1 ALHAMBRA PLAZA  
SUITE 1410  
CORAL GABLES, FL 33134 US

**FEI Number:** 82-4778459

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SOMERSET CORPORATE SERVICES, INC.  
1 ALHAMBRA PLAZA  
1410  
CORAL GABLES, FL 33134 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 P  
Name VOLLMER DE MARCELLUS, CHRISTINE  
Address 444 BRICKELL AVENUE, SUITE 401  
City-State-Zip: MIAMI FL 33131

Title VP  
Name OLAVARRIA, MARIA A  
Address 444 BRICKELL AVENUE, SUITE 401  
City-State-Zip: MIAMI FL 33131

Title S  
Name AGUILAR, CARLOS I  
Address 452 RIDGEWOOD ROAD  
City-State-Zip: KEY BISCAYNE FL 33149

Title T  
Name VOLLMER, HENRIQUE  
Address 444 BRICKELL AVENUE, SUITE 401  
City-State-Zip: MIAMI FL 33131

*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:** CHRISTINE VOLLMER DE MARCELLUS

**PRESIDENT**

**03/23/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date