

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 528526

Entity Name: BERMELO, AJAMIL & PARTNERS, INC.**Current Principal Place of Business:**2601 S. BAYSHORE DRIVE
SUITE 1000
MIAMI, FL 33133**Current Mailing Address:**2601 S. BAYSHORE DRIVE
SUITE 1000
MIAMI, FL 33133**FEI Number:** 59-1722486**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DANIELS & KASHTAN, P.A.
ATTN: JOSEPH W DOWNS III
3300 PONCE DE LEON BLVD
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	C
Name	BERMELO, WILLY A
Address	2601 S. BAYSHORE DRIVE, 10TH FLOOR
City-State-Zip:	MIAMI FL 33133

Title	V,S
Name	HOROVITZ, BERNARD N
Address	2601 S BAYSHORE DRIVE, 10TH FLOOR
City-State-Zip:	MIAMI FL 33133

Title	CEOP
Name	AJAMIL, LUIS
Address	2601 S. BAYSHORE DRIVE, 10TH FLOOR
City-State-Zip:	MIAMI FL 33133

Title	MGR
Name	GAMBLE, MONIKA
Address	2601 S. BAYSHORE DRIVE, 10TH FLOOR
City-State-Zip:	MIAMI FL 33133

Title	V,S
Name	FERNANDEZ, RAIMUNDO
Address	2601 S. BAYSHORE DRIVE, 10TH FLOOR
City-State-Zip:	MIAMI FL 33133

Title	D
Name	COHEN-MORA, MAYRA
Address	2601 S. BAYSHORE DRIVE
City-State-Zip:	MIAMI FL 33133

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS AJAMIL

CEOP

01/02/2013

Electronic Signature of Signing Officer/Director Detail_____
Date