

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 624392

**FILED**  
**Jan 12, 2017**  
**Secretary of State**  
**CC0355299060**

**Entity Name:** PORTOFINO III, INC.

**Current Principal Place of Business:**

C/O LERMAN AND LERMAN, P.A.  
48 EAST FLAGLER STREET, PENTHOUSE 101  
MIAMI, FL 33131

**Current Mailing Address:**

C/O LERMAN AND LERMAN, P.A.  
48 EAST FLAGLER STREET, PENTHOUSE 101  
MIAMI, FL 33131

**FEI Number:** 59-1928639

**Certificate of Status Desired:** No

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

LERMAN & LERMAN PA  
48 EAST FLAGLER STREET,  
PENTHOUSE 101  
MIAMI, FL 33131 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 PD  
Name ZAROR, FUAD  
Address 48 E. FLAGLER ST. #101  
City-State-Zip: MIAMI FL

Title VD  
Name ANANIAS, ELIAS  
Address 48 E. FLAGLER ST. #101  
City-State-Zip: MIAMI FL

Title SD  
Name LERMAN, JORGE  
Address 48 E. FLAGLER ST. #101  
City-State-Zip: MIAMI FL

Title ASST. SECRETARY  
Name LERMAN, BENJAMIN  
Address C/O LERMAN AND LERMAN, P.A.  
48 EAST FLAGLER STREET,  
PENTHOUSE 101  
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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JORGE LERMAN

**SECRETARY**

**01/12/2017**

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