

2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F84295

Entity Name: WILHELMINA - MIAMI, INC.**Current Principal Place of Business:**1100 WEST AVENUE, SUITE 326
MIAMI BEACH, FL 33139**Current Mailing Address:**1100 WEST AVENUE, SUITE 326
MIAMI BEACH, FL 33139 US**FEI Number:** 59-2202633**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LUCAS, ERIN
1100 WEST AVENUE, SUITE 326
MIAMI BEACH, FL 33139 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:** ERIN LUCAS

06/12/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EVP
Name LUCAS, ERIN
Address 1100 WEST AVENUE, SUITE 326
City-State-Zip: MIAMI BEACH FL 33139

Title CEO
Name VAICKUS, ALEX
Address 300 PARK AVENUE SOUTH
City-State-Zip: NEW YORK NY 10010

Title TREASURER
Name CHAIKEN, DAVID
Address 300 PARK AVENUE SOUTH
City-State-Zip: NEW YORK NY 10010

Title ASST. SECRETARY
Name SINGH, SONIA
Address 300 PARK AVENUE SOUTH
City-State-Zip: NEW YORK NY 10010

Title CEO
Name VAICKUS, ALEX
Address 300 PARK AVENUE SOUTH
City-State-Zip: NEW YORK NY 10010

Title TREASURER
Name CHAIKEN, DAVID
Address 300 PARK AVENUE SOUTH
City-State-Zip: NEW YORK NY 10010

Title ASST. SECRETARY
Name SINGH, SONIA
Address 300 PARK AVENUE SOUTH
City-State-Zip: NEW YORK NY 10010

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: ERIN LUCAS

EVP

06/12/2015

Electronic Signature of Signing Officer/Director Detail

Date