

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M95744

**FILED  
Jan 13, 2017  
Secretary of State  
CC0418980047**

**Entity Name:** AMAREX CORPORATION

**Current Principal Place of Business:**

1602 ALTON RD  
SUITE 100  
MIAMI, FL 33139

**Current Mailing Address:**

1602 ALTON RD  
SUITE 100  
MIAMI, FL 33139 US

**FEI Number:** 65-0076883

**Certificate of Status Desired:** Yes

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

INTERNATIONAL CENTER  
150 SE 2ND AVENUE  
1002  
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 VP, SECRETARY  
Name NUH, A.  
Address 1602 ALTON RD. STE 100  
City-State-Zip: MIAMI BEACH FL 33139

Title VP, ASST. SECRETARY  
Name VALLEE, A  
Address 1602 ALTON ROAD, STE. 100  
City-State-Zip: MIAMI BEACH FL 33139

Title PRESIDENT, ASST. SECRETARY  
Name SMEJDA, L.  
Address 1602 ALTON ROAD  
100  
City-State-Zip: MIAMI BEACH FL 33139

Title TREASURER  
Name VALLEE, S.  
Address 1602 ALTON RD  
SUITE 100  
City-State-Zip: MIAMI FL 33139

Title DIRECTOR  
Name ALEXANDER, A.  
Address 1602 ALTON RD  
SUITE 100  
City-State-Zip: MIAMI FL 33139

*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:** L. SMEJDA

**PRESIDENT**

**01/13/2017**

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

\_\_\_\_\_  
Date