

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000013446

**Entity Name:** MWM INVESTMENT ADVISORS, INC.

**Current Principal Place of Business:**

2600 DOUGLAS ROAD  
SUITE 1010B  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2600 S DOUGLAS ROAD  
SUITE 1010B  
CORAL GABLES, FL 33134

**FEI Number:** 42-1583368

**Certificate of Status Desired:** No

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

ADORNO & YOSS  
2525 PONCE DE LEON BLVD  
SUITE 400  
MIAMI, 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 LOPEZ, PEDRO MR  
Address 2600 S DOUGLAS ROAD, SUITE 1010B  
City-State-Zip: CORAL GABLES FL 33134

Title S  
Name OVALLES, MARLO G MR.  
Address 2600 S DOUGLAS ROAD, SUITE 1010B  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name D'ALFONSO, MARIO V MR.  
Address 2600 S DOUGLAS ROAD, SUITE 1010B  
City-State-Zip: CORAL GABLES FL 33134

Title GM  
Name D'ALFONSO, ITALO  
Address 2600 S DOUGLAS ROAD, SUITE 1010B  
City-State-Zip: CORAL GABLES FL 33134

*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:** ITALO D'ALFONSO

**GENERAL MANAGER**

**03/20/2014**

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

\_\_\_\_\_  
Date