

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000094891

Entity Name: 1194 MIAMI CORP.

**Current Principal Place of Business:**

1925 BRICKELL AVE  
#211  
MIAMI, FL 33129

**FILED**  
**Mar 14, 2014**  
**Secretary of State**  
**CC4034498261**

**Current Mailing Address:**

1925 BRICKELL AVE  
#211  
MIAMI, FL 33129 US

**FEI Number: 20-1272280**

**Certificate of Status Desired: No**

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

RAFFO, RENE  
1925 BRICKELL AVE  
#211  
MIAMI, FL 33129 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 RAFFO, AURELIO R  
Address 1925 BRICKELL AVE # 211  
City-State-Zip: MIAMI FL 33129

Title VP  
Name RAFFO, ELENA  
Address 1925 BRICKELL AVE # 211  
City-State-Zip: MIAMI FL 33129

Title S  
Name RAFFO, ELENA  
Address 1925 BRICKELL AVE # 211  
City-State-Zip: MIAMI FL 33129

Title T  
Name RAFFO, ELENA  
Address 1925 BRICKELL AVE # 211  
City-State-Zip: MIAMI FL 33129

Title D  
Name RAFFO, SOFIA  
Address 1925 BRICKELL AVE # 211  
City-State-Zip: MIAMI FL 33129

Title D  
Name RAFFO, JESSICA  
Address 1925 BRICKELL AVE #211  
City-State-Zip: MIAMI FL 33129

*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: AURELIO RENE RAFFO**

**PRESIDENT**

**03/14/2014**

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

\_\_\_\_\_  
Date