

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000001000

**FILED**  
**Mar 18, 2014**  
**Secretary of State**  
**CC1933359917**

**Entity Name:** PININFARINA OF AMERICA CORP.

**Current Principal Place of Business:**

1101 BRICKELL AVENUE  
SOUTH TOWER, 8TH FLOOR 8TH FLOOR  
MIAMI, FL 33131

**Current Mailing Address:**

1101 BRICKELL AVENUE  
SOUTH TOWER, 8TH FLOOR 8TH FLOOR  
MIAMI, FL 33131 US

**FEI Number:** 20-4235061

**Certificate of Status Desired:** No

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

ADWAR, RENEE ESQ  
848 BRICKELL AVE.  
SUITE 830  
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 P  
Name PININFARINA, PAOLO  
Address 848 BRICKELL AVE STE 830  
City-State-Zip: MIAMI FL 33131

Title S  
Name DE LISE , MATTEO  
Address 1101 BRICKELL AVENUE  
SOUTH TOWER, 8TH FLOOR 8TH  
FLOOR  
City-State-Zip: MIAMI FL 33131

Title T  
Name ALBERTINI, GIANFRANCO  
Address 848 BRICKELL AVENUE, SUITE 830  
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:** PAOLO PININFARINA

**PRESIDENT**

**03/18/2014**

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

\_\_\_\_\_  
Date