

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000064880

**Entity Name:** TN DORAL GOLF CORP.

**Current Principal Place of Business:**

1800 SW 1 AVENUE  
SUITE 601  
MIAMI, FL 33129

**Current Mailing Address:**

1800 SW 1 AVENUE  
SUITE 601  
MIAMI, FL 33129 US

**FEI Number:** 27-0658428

**Certificate of Status Desired:** No

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

AGI REGISTERED AGENTS, INC.  
1000 BRICKELL AVENUE  
SUITE 300  
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 DPST  
Name PIETRI, JOSE ANTONIO  
Address 1800 SW 1 AVENUE  
SUITE 601  
City-State-Zip: MIAMI FL 33129

Title D  
Name MENDOZA HERNANDEZ, JUAN  
LORENZO  
Address 21 BAY HEIGHTS DR.  
City-State-Zip: MIAMI FL 33133

Title D  
Name AZPURUA, JORGE  
Address 910 CYPRESS GROVE DR.  
City-State-Zip: POMPANO BEACH FL 33069

Title D  
Name PONCE, RENE  
Address 1000 BRICKELL PLAZA  
APT. 3305  
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:** JOSE ANTONIO PIETRI

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04/06/2021

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

\_\_\_\_\_  
Date