

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000051402

**Entity Name:** CIMO CORP**Current Principal Place of Business:**5445 COLLINS AV  
726  
MIAMI BEACH, FL 33140**Current Mailing Address:**7631 SW 146 AVE  
MIAMI, FL 33183 US**FEI Number:** 80-0868675**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BIANCONI, MONICA J  
5445 COLLINS AV  
726  
MIAMI BEACH, FL 33140 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	BIANCONI, MONICA
Address	5445 COLLINS AV SUITE 726
City-State-Zip:	MIAMI BEACH FL 33140

Title	MGR
Name	COULLERY, MAURICIO
Address	5445 COLLINS AV SUITE 726
City-State-Zip:	MIAMI BEACH FL 33140

Title	GM
Name	COULLERY, OSCAR JR
Address	5445 COLLINS AV SUITE 726
City-State-Zip:	MIAMI BEACH FL 33140

Title	VP
Name	COULLERY, OSCAR
Address	5445 COLLINS AV SUITE 726
City-State-Zip:	MIAMI BEACH FL 33140

Title	AVP
Name	COULLERY, ROMINA
Address	5445 COLLINS AV SUITE 726
City-State-Zip:	MIAMI BEACH FL 33140

*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:** MONICA BIANCONI**PRESIDENT****04/15/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date