

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000068856

**Entity Name:** ALGODI CORP

**Current Principal Place of Business:**

5161 COLLINS AVE  
STE 1510  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

5161 COLLINS AVE  
STE 1510  
MIAMI BEACH, FL 33141

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MAURI VICO, ALBA RAQUEL  
5161 COLLINS AVE  
1510  
MIAMI BEACH, FL 33141 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 S  
Name TULIP GROUP S.A  
Address 5161 COLLINS AVE STE 1510  
City-State-Zip: MIAMI BEACH FL 33141

Title P  
Name MAURI VICO, ALBA RAQUEL  
Address 5161 COLLINS AVE STE 1510  
City-State-Zip: MIAMI BEACH FL 33141

Title VP  
Name MANEIRO MAURI, GONZALO  
Address 5161 COLLINS AVE STE 1510  
City-State-Zip: MIAMI BEACH FL 33141

*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:** GONZALO MAURI

**PRESIDENT**

**04/01/2016**

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

\_\_\_\_\_  
Date