

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000029530

**Entity Name:** DEWA MIAMI ENTERPRISE, INC.

**Current Principal Place of Business:**

40-35 22ND ST.  
LONG ISLAND CITY, NY 11101

**Current Mailing Address:**

40-35 22ND ST.  
LONG ISLAND CITY, NY 11101 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ARCADIER & ASSOCIATES P.A.  
2815 W. NEW HAVEN AVE  
304  
MELBOURNE, FL 32904 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 WESTON, MARTIN  
Address 22 GLAMFORD AVE.  
City-State-Zip: PORT WASHINGTON NY 11050

Title VP  
Name AHLIN, ENGPHEEN FOONG  
Address 72-10 22ND ST. #1G  
City-State-Zip: FOREST HILLS NY 11375

Title T  
Name WESTON, MARTIN  
Address 22 GLAMFORD AVE.  
City-State-Zip: PORT WASHINGTON NY 11050

Title SEC  
Name AHLIN, ENGPHEEN FOONG  
Address 72-10 22ND ST. #1G  
City-State-Zip: FOREST HILLS NY 11375

*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:** MARTIN WESTON

P

03/22/2017

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

\_\_\_\_\_  
Date