

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000057965

Entity Name: M.I.A.M.F. INVESTMENTS, INC.**Current Principal Place of Business:**20201 E COUNTRY CLUB DR
906
AVENTURA, FL 33180**Current Mailing Address:**1722 SHERIDAN ST
STE 349
HOLLYWOOD, FL 33020 US**FEI Number:** 82-0923950**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAMIANI, ROMINA
1722 SHERIDAN ST
STE 349
HOLLYWOOD, FL 33020 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:** ROMINA DAMIANI

04/23/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|-----------------------------|
| Title | P |
| Name | RAPPALLINI, FEDERICO |
| Address | 1722 SHERIDAN ST STE 349 |
| City-State-Zip: | HOLLYWOOD FL 33020 |

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|-----------------|-----------------------------|
| Title | VP, S |
| Name | RAPPALLINI, MATIAS |
| Address | 1722 SHERIDAN ST STE 349 |
| City-State-Zip: | HOLLYWOOD FL 33020 |

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|-----------------|-----------------------------|
| Title | VP |
| Name | RAPPALLINI, MARTIN |
| Address | 1722 SHERIDAN ST STE 349 |
| City-State-Zip: | HOLLYWOOD FL 33020 |

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|-----------------|-----------------------------|
| Title | TREASURER |
| Name | RAPPALLINI, IGNACIO |
| Address | 1722 SHERIDAN ST STE 349 |
| City-State-Zip: | HOLLYWOOD FL 33020 |

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|-----------------|-----------------------------|
| Title | TREASURER |
| Name | RAPPALLINI, ANIBAL |
| Address | 1722 SHERIDAN ST STE 349 |
| City-State-Zip: | HOLLYWOOD FL 33020 |

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|-----------------|-----------------------------|
| Title | SECRETARY |
| Name | DAMIANI, ROMINA |
| Address | 1722 SHERIDAN ST STE 349 |
| City-State-Zip: | HOLLYWOOD FL 33020 |

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: ROMINA DAMIANI**SECRETARY**

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date