## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000067298

Entity Name: MIAMI INVESTMENTS 626567, CORP

**FILED** Mar 27, 2019 **Secretary of State** 3855677331CC

## **Current Principal Place of Business:**

C/O HECTOR J. MIR

815 PONCE DE LEON BOULEVARD 3RD FLOOR CORAL GABLES, FL 33134

## **Current Mailing Address:**

C/O IADVISE 747 3RD AVENUE STE 34B NEW YORK, NY 10017 US

FEI Number: 81-1767580 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MIR, HECTOR J P.A. 815 PONCE DE LEON BOULEVARD 3RD FLOOR CORAL GABLES, FL 33134 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: HECTOR J. MIR 03/27/2019

> Date Electronic Signature of Registered Agent

> > Title

**TREASURER** 

Officer/Director Detail:

D

Title

Title Title D

Name STANCHIERI, ANNA MARIA Name STANCHIERI, STEFANIA

C/O HECTOR J. MIR Address Address C/O HECTOR J. MIR

815 PONCE DE LEON BOULEVARD 815 PONCE DE LEON BOULEVARD

3RD FLOOR 3RD FLOOR

CORAL GABLES FL 33134 CORAL GABLES FL 33134 City-State-Zip: City-State-Zip:

STANCHIERI, MAURO GIL, VICTOR M Name Name

Address C/O HECTOR J. MIR Address C/O IADVISE

815 PONCE DE LEON BOULEVARD 747 3RD AVENUE STE 34B 3RD FLOOR NEW YORK NY 10017 City-State-Zip:

City-State-Zip: CORAL GABLES FL 33134

03/27/2019 SIGNATURE: VICTOR GIL DIRECTOR

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.