## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000067298

Entity Name: MIAMI INVESTMENTS 626567, CORP

**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 04/10/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title D/P Title D

Name STANCHIERI, ANNA MARIA Name STANCHIERI, STEFANIA

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

815 PONCE DE LEON BOULEVARD 815 PONCE DE LEON BOULEVARD

3RD FLOOR 3RD FLOOR

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

TitleDTitleTREASURERNameSTANCHIERI, MAURONameGIL, VICTOR M

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

815 PONCE DE LEON BOULEVARD 747 3RD AVENUE STE 34B

3RD FLOOR City-State-Zip: NEW YORK NY 10017

City-State-Zip: CORAL GABLES FL 33134

SIGNATURE: ANNA MARIA STANCHIERI

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.

D

Electronic Signature of Signing Officer/Director Detail

04/10/2018

FILED Apr 10, 2018

**Secretary of State** 

CC9500894437

Date