

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000059910

**Entity Name:** FIFTYFIFTY MICHIGAN INC.

**Current Principal Place of Business:**

550 MICHIGAN AVE.  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

PO BOX 191095  
MIAMI BEACH, FL 33119 US

**FEI Number:** 93-2944988

**Certificate of Status Desired:** No

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

CECCHINI, FRANCESCO  
227 9TH STREET #2  
MIAMI BEACH, FL 33139 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 D  
Name CHIALASTRI, MATTEO  
Address 550 MICHIGAN AVE.  
City-State-Zip: MIAMI BEACH FL 33139

Title D  
Name CECCHINI, FRANCESCO  
Address 550 MICHIGAN AVE.  
City-State-Zip: MIAMI BEACH FL 33139

Title D  
Name AGUIRRE, MAXIMILIANO  
Address 550 MICHIGAN AVE.  
City-State-Zip: MIAMI BEACH FL 33139

*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:** MATTEO CHIALASTRI

D

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date