

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000005149

**Entity Name:** ALISSA RAE, INC.

**Current Principal Place of Business:**

115 W. SAN MARINO DR.  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

25 SE 2ND AVENUE  
SUITE 425  
MIAMI, FL 33131

**FEI Number:** 65-0483472

**Certificate of Status Desired:** No

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

STEIN, ALISSA R.  
115 W SAN MARINO DR  
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 PD  
Name STEIN, ALISSA R  
Address 115 W. SAN MARINO DR.  
City-State-Zip: MIAMI BEACH FL 33139

Title SD  
Name STEIN-PARDO, LARA C  
Address 115 W SAN MARINO DR.  
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:** ALISSA R. STEIN

**PRESIDENT**

**02/29/2016**

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

\_\_\_\_\_  
Date