

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000103444

**Entity Name:** 161 CORP.

**Current Principal Place of Business:**

161 ALMERIA AVENUE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

161 ALMERIA AVENUE  
CORAL GABLES, FL 33134

**FEI Number:** 65-0737053

**Certificate of Status Desired:** Yes

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

AMES, STUART D  
2200 MUSEUM TOWER  
250 WEST FLAGLER STREET  
MIAMI, FL 33130 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            CEO  
Name            BROSCH, BRUCE F  
Address        161 ALMERIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title            VP, DIRECTOR  
Name            WOLFE, JR, DONALD F  
Address        161 ALMERIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title            VP, DIRECTOR  
Name            BUSTEED, PATRICK  
Address        161 ALMERIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title            PRESIDENT, DIRECTOR  
Name            REYES, IGOR  
Address        161 ALMERIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

*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:** IGOR REYES

**PRESIDENT**

**01/14/2020**

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

\_\_\_\_\_  
Date