

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000146016

**Entity Name:** MIDTOWN REAL ESTATES, LLC

**Current Principal Place of Business:**

465 BRICKELL AVENUE, UNIT 3902  
MIAMI, FL 33130

**Current Mailing Address:**

465 BRICKELL AVENUE, UNIT 3902  
MIAMI, FL 33131 US

**FEI Number:** 35-2489031

**Certificate of Status Desired:** No

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

PETER YANOWITCH, ESQ.  
2903 SALZEDO ST., 2ND 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           VINICIUS ALBERTO CIMA  
Address        465 BRICKELL AVENUE, UNIT 3902  
City-State-Zip: MIAMI FL 33130

Title           AUTHORIZED MEMBER  
Name           LEANDRO, LUIS CIMA  
Address        465 BRICKELL AVENUE, UNIT 3902  
City-State-Zip: MIAMI FL 33130

Title           AUTHORIZED MEMBER  
Name           CIMA, GENOR ALBERTO  
Address        465 BRICKELL AVENUE, UNIT 3902  
City-State-Zip: MIAMI FL 33130

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** VINICIUS ALBERTO CIMA

**MGR**

**05/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date