

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000152453

**Entity Name:** MIA CAPITAL INVESTMENTS, LLC

**Current Principal Place of Business:**

20900 NE 30TH AVENUE  
SUITE 318  
AVENTURA, FL 33180

**Current Mailing Address:**

20900 NE 30TH AVENUE  
SUITE 318  
AVENTURA, FL 33180

**FEI Number:** 37-1935015

**Certificate of Status Desired:** No

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

WEINTRAUB, ABRAHAM  
20900 NE 30TH AVENUE  
SUITE 318  
AVENTURA, FL 33180 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 AUTHORIZED MEMBER  
Name FCP HOLDINGS III, LLC  
Address 2600 DOUGLAS ROAD  
PH 1  
City-State-Zip: CORAL GABLES FL 33143

Title AUTHORIZED MEMBER  
Name ILS TRUST FBO IZAC BEN-SHMUEL  
Address 56 LEONARD ST  
49E  
City-State-Zip: NEW YORK NY 10013

Title AUTHORIZED MEMBER  
Name SAMDAN INVESTMENTS, INC.  
Address 20900 NE 30TH AVE  
SUITE 318  
City-State-Zip: AVENTURA FL 33180

*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:** ABRAHAM WEINTRAUB

**AUTHORIZED SIGNOR**

**04/29/2019**

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

\_\_\_\_\_  
Date