

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000001317

**Entity Name:** HAMMOND VENTURE, INC.**Current Principal Place of Business:**121 ALHAMBRA PLAZA, SUITE 1600  
CORAL GABLES, FL 33134**Current Mailing Address:**121 ALHAMBRA PLAZA, SUITE 1600  
CORAL GABLES, FL 33134 US**FEI Number:** 59-2248649**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROTH, JEFFREY C ESQ  
866 SOUTH DIXIE HIGHWAY  
CORAL GABLES, FL 33146 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	VP
Name	BELL, JAMES F JR
Address	121 ALHAMBRA PLAZA, SUITE 1600
City-State-Zip:	CORAL GABLES FL 33134

Title	T
Name	GIL, YAZMIN
Address	121 ALHAMBRA PLAZA, SUITE 1600
City-State-Zip:	CORAL GABLES FL 33134

Title	EXECUTIVE VP
Name	MORRIS, SPENCER
Address	THE ALLEN MORRIS COMPANY 121 ALHAMBRA PLAZA SUITE 1600
City-State-Zip:	CORAL GABLES FL 33134

Title	P
Name	MORRIS, W. ALLEN
Address	121 ALHAMBRA PLAZA, SUITE 1600
City-State-Zip:	CORAL GABLES FL 33134

Title	COO
Name	DICORPO, PETER
Address	THE ALLEN MORRIS COMPANY 121 ALHAMBRA PLAZA SUITE 1600
City-State-Zip:	CORAL GABLES FL 33134

Title	VP
Name	PINEIRO, ENRIQUE
Address	THE ALLEN MORRIS COMPANY 121 ALHAMBRA PLAZA SUITE 1600
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:** YAZMIN GIL**TREASURER****01/11/2021**

Electronic Signature of Signing Officer/Director Detail

Date