2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756392

Entity Name: CODEC INC.

Current Principal Place of Business:

1223 SW 4TH STREET
2ND FLOOR
MIAMI, FL 33135

Current Mailing Address:

1223 SW 4TH STREET
2ND FLOOR
MIAMI, FL 33135 US

FEI Number: 59-2110238

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, GUARIONE M
1223 SW 4TH STREET
2ND FLOOR
MIAMI, FL 33135 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	TREASURER, DIRECTOR		Title	DIRECTOR
Name	SWITZER, RAQUEL C		Name	PUENTE, ASELA
Address	1360 S. DIXIE HWY SUITE 355		Address	1223 SW 4TH STREET 2ND FLOOR
City-State-Zip:	CORAL GABLES FL 33146		City-State-Zip:	MIAMI FL 33135

Title	PRESIDENT, DIRECTOR		Title	EXECUTIVE VICE PRESIDENT, DIRECTOR
Name	DIAZ, GUARIONE M		Name	PAZOS, ANDRES
Address	1223 SW 4TH STREET 2ND FLOOR		Address	1223 SW 4TH STREET 2ND FLOOR
City-State-Zip:	MIAMI FL 33135		City-State-Zip:	MIAMI FL 33135

Title	SECRETARY, DIRECTOR		Title	DIRECTOR
Name	SANTANA, CRISTINA		Name	GONZALEZ, GRACIELA
Address	1223 SW 4TH STREET 2ND FLOOR		Address	21215 SW 85 AVENUE
City-State-Zip:	MIAMI FL 33135		City-State-Zip:	MIAMI FL 33189

Title	DIRECTOR, CHAIRMAN
Name	MASVIDAL, SERGIO J
Address	6800 SW 80TH AVENUE
City-State-Zip:	MIAMI FL 33143

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GUARIONE M. DIAZ   PRESIDENT   02/13/2019

Electronic Signature of Signing Officer/Director Detail   Date