

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M53012

**Entity Name:** CARISAM-SAMUEL MEISEL (FL), INC.

**Current Principal Place of Business:**

10900 N.W. 27TH ST.  
MIAMI, FL 33172

**Current Mailing Address:**

10900 N.W. 27TH ST.  
MIAMI, FL 33172 US

**FEI Number: 74-2478978**

**Certificate of Status Desired: No**

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

RIFAS, HAROLD  
7900 RED ROAD, STE. 10  
MIAMI, FL 33143 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 PD  
Name GRANEK, DAVID  
Address 10900 NW 27 STREET  
City-State-Zip: MIAMI FL 33172

Title VPSD  
Name RIFAS, HAROLD  
Address 7900 RED RD., STE. 10  
City-State-Zip: MIAMI FL 33143

Title AST  
Name MARTELL, ALBERT  
Address 10900 NW 27TH ST.  
City-State-Zip: MIAMI FL 33172

Title VPS  
Name PADILLA, IVAN  
Address 10900 NW 27TH STREET  
City-State-Zip: MIAMI FL 33172

*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: HAROLD RIFAS**

**VICE PRESIDENT S**

**01/17/2018**

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

\_\_\_\_\_  
Date