

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000011152

**FILED**  
**Feb 09, 2016**  
**Secretary of State**  
**CC7741064170**

**Entity Name:** MIAMI 58 CORPORATION

**Current Principal Place of Business:**

C/O G. FRANK QUESADA, ESQ.  
1313 PONCE DE LEON BLVD., SUITE 200  
CORAL GABLES, FL 33134

**Current Mailing Address:**

C/O G. FRANK QUESADA, ESQ.  
1313 PONCE DE LEON BLVD., SUITE 200  
CORAL GABLES, FL 33134

**FEI Number:** 65-1076492

**Certificate of Status Desired:** No

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

QUESADA, G. FRANK ESQ.  
1313 PONCE DE LEON BLVD., SUITE 200  
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

**Officer/Director Detail :**

Title PD  
Name JUELLE, TERESA  
Address 1313 PONCE DE LEON BLVD STE 200  
City-State-Zip: CORAL GABLES FL

Title SD  
Name JUELLE, SUSAN  
Address 1313 PONCE DE LEON BLVD STE 200  
City-State-Zip: CORAL GABLES FL

Title TD  
Name JUELLE, JOSE A  
Address 1313 PONCE DE LEON BLVD STE 200  
City-State-Zip: CORAL GABLES FL

*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:** JOSE A. JUELLE

TRES

02/09/2016

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

\_\_\_\_\_  
Date