

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000068581

**FILED**  
**Feb 26, 2016**  
**Secretary of State**  
**CC9192517782**

**Entity Name:** MELIREY PANAMA CORPORATION

**Current Principal Place of Business:**

999 PONCE DE LEON BLVD.  
1110  
CORAL GABLES, FL 33134

**Current Mailing Address:**

P.O. BOX 140970  
CORAL GABLES, FL 33114

**FEI Number:** 65-1119815

**Certificate of Status Desired:** Yes

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

PRATS FERNANDEZ & COMPANY, P.A.  
999 PONCE DE LEON BLVD.  
1110  
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            PVSD  
Name            CARBONE, NORMA A  
Address        P.O. BOX  
City-State-Zip: CORAL GABLES FL 33114

Title            VP  
Name            AKILINA PRIVATE FOUNDATION  
Address        P.O. BOX 140970  
City-State-Zip: CORAL GABLES FL 33114

*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:** CARBONE , NORMA A

**PVSD**

**02/26/2016**

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

\_\_\_\_\_  
Date