

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000108989

**FILED**  
**Jan 07, 2024**  
**Secretary of State**  
**7779854603CC**

**Entity Name:** WIIFM INC

**Current Principal Place of Business:**

WIIFM INC C/O MARIA DON-VEGA  
4672 NW 114 AVENUE SUITE 312  
MIAMI, FL 33178

**Current Mailing Address:**

WIIFM INC C/O MARIA DON-VEGA  
4672 NW 114 AVENUE SUITE 312  
MIAMI, FL 33178 US

**FEI Number:** 65-0296873

**Certificate of Status Desired:** No

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

ST. LOUIS LAW, P.A.  
ST LOUIS LAW, P.A.  
2450 HOLLYWOOD BLVD SUITE 104  
HOLLYWOOD, FL 33020 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:** VLADIMIR ST LOUIS, ATTORNEY.

01/07/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DON-VEGA, MARIA C.  
Address        WIIFM INC C/O MARIA DON-VEGA  
                  4672 NW 114 AVENUE SUITE 312  
City-State-Zip: MIAMI FL 33178

Title            DIRECTOR  
Name            VEGA, CARLOS A  
Address        WIIFM INC C/O CARLOS A. VEGA  
                  4672 NW 114 AVENUE SUITE 312  
City-State-Zip: MIAMI FL 33178

*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:** MARIA C DON-VEGA

**PRESIDENT**

01/07/2024

Electronic Signature of Signing Officer/Director Detail

Date