## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000058852

Entity Name: ALIMER AVENTURA ISLES 1334, INC.

**Current Principal Place of Business:** 

19316 N. E. 9 PLACE MIAMI, FL 33179

**Current Mailing Address:** 

19316 N. E. 9 PLACE MIAMI. FL 33179

FEI Number: 37-1748127 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GASTON R. ALVAREZ, P. A. 2655 S. LE JEUNE ROAD PH-1C 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

FILED Mar 20, 2017

**Secretary of State** 

CC0454050725

Officer/Director Detail:

Title DP Title DVP

Name CHOCRON BERGEL, MOISES Name CHOCRON BRITO, ESTHER

 Address
 19316 N. E. 9 PLACE

 City-State-Zip:
 MIAMI FL 33179

 Address
 19316 N. E. 9 PLACE

 City-State-Zip:
 MIAMI FL 33179

Title DS Title DT

Name BRITO DE CHOCRON, ALICIA Name CHOCRON BRITO, MERCEDES

 Address
 19316 N. E. 9 PLACE
 Address
 19316 N. E. 9 PLACE

 City-State-Zip:
 MIAMI FL 33179
 City-State-Zip:
 MIAMI FL 33179

Title DAS

Name CHOCRON BRITO, DIANA
Address 19316 N. E. 9 PLACE
City-State-Zip: MIAMI FL 33179

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: MOISES CHOCRON BERGEL

**PRESIDENT** 

03/20/2017