2022 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

Name and Address of Current Registered Agent:

GASTON R. ALVAREZ, P. A. 2655 S. LE JEUNE ROAD PH-1C CORAL GABLES, FL 33134 US FILED Apr 18, 2022 Secretary of State 6555878177CC

Certificate of Status Desired: No

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

Officer/Director Detail :

| Title | DP | Title | DVP |
|----------------------------|---------------------------------------|----------------------------|---------------------------------------|
| Name | CHOCRON BRITO, DIANA | Name | CHOCRON BRITO, ESTHER |
| 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 | DS | Title | DT |
| Name | BRITO DE CHOCRON, ALICIA | Name | CHOCRON BRITO, MERCEDES |
| | | | |
| Address | 19316 N. E. 9 PLACE | Address | 19316 N. E. 9 PLACE |
| Address City-State-Zip: | 19316 N. E. 9 PLACE MIAMI FL 33179 | Address City-State-Zip: | 19316 N. E. 9 PLACE 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: ESTHER CHOCRON BRITO

VICE-PRESIDENT

04/18/2022

Date

Electronic Signature of Signing Officer/Director Detail

Date