2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000004112

Entity Name: AMERANT INVESTMENTS, INC

Current Principal Place of Business:

220 ALHAMBRA CIRCLE, 2ND FLOOR

CORAL GABLES. FL 33134

Current Mailing Address:

220 ALHAMBRA CIRCLE, 2ND FLOOR CORAL GABLES. FL 33134 US

FEI Number: 65-1126480 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CTC MANAGEMENT SERVICES, LLC 220 ALHAMBRA CIRCLE, 2ND FLOOR 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 27, 2023

Secretary of State

6381760837CC

Officer/Director Detail:

Title Title CHAIRMAN, DIRECTOR CAPRILES, ALBERTO Name Name IAFIGLIOLA, CARLOS Address 220 ALHAMBRA CIRCLE 220 ALHAMBRA CIRCLE Address City-State-Zip: CORAL GABLES FL 33134 CORAL GABLES FL 33134 City-State-Zip:

Title 0 Title S

Name GUERRERO, SERGIO MENDOZA, ALBERTO Name

Address 220 ALHAMBRA CIRCLE, 2ND FLOOR Address 220 ALHAMBRA CIRCLE, 11TH FLOOR

CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134 City-State-Zip:

Title DIRECTOR

Title **DIRECTOR** Name

GARGANTA, ANDY PARRA, PEDRO Name

Address 220 ALHAMBRA CIRCLE 2ND FLOOR 220 ALHAMBRA CIRCLE 2ND FLOOR Address

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

DIRECTOR Title

Name LEVINE. HOWARD

Address 220 ALHAMBRA CIRCLE 2ND FLOOR

City-State-Zip: CORAL GABLES FL 33134

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: MENDOZA, ALBERTO 03/27/2023 SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date