

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000004629

FILED
Apr 30, 2012
Secretary of State

Entity Name: FLORIDA OUTLET INSURANCE, LLC

Current Principal Place of Business:

4976 N PINE ISLAND RD
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

4976 N PINE ISLAND RD
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: 27-4522366

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O&P TAX-ACCOUNTING CORP
11890 SW 8TH STREET
PENTHOUSE # 5
MIAMI, FL 33184 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: COGLIONESSE, MARIA
Address: 6503 SW 166 CT
City-St-Zip: MIAMI, FL 33193 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARIA COGLIONESSE

MGRM

04/30/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date