

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000100416

FILED
Apr 05, 2012
Secretary of State

Entity Name: AMIGO INSURANCE & ASSOCIATES, INC.

Current Principal Place of Business:

4234 SW 152 AVENUE #118
MIAMI, FL 33185 US

New Principal Place of Business:

Current Mailing Address:

4234 SW 152 AVENUE #118
MIAMI, FL 33185 US

New Mailing Address:

FEI Number: 27-4343628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNOZ, JUAN J
4234 SW 152 AVENUE #118
MIAMI, FL 33185 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

OFFICERS AND DIRECTORS:

Title: P
Name: MUNOZ, JUAN
Address: 8300 NW 53RD STREET SUITE 350
City-St-Zip: DORAL, FL 33166 US

Title: T
Name: GARCIA, WILLIAM
Address: 8300 NW 53RD STREET SUITE 350
City-St-Zip: DORAL, FL 33166 US

Title: VP/S
Name: PEREZ, PILAR MARIA
Address: 8300 NW 53RD STREET SUITE 350
City-St-Zip: DORAL, FL 33166

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: WILLIAM GARCIA

P

04/05/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date