## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F29059

Entity Name: FAMILY INSURANCE SERVICES, INC.

**Current Principal Place of Business:** 

18463 PINES BLVD

PEMBROKE PIENS. FL 33029

**Current Mailing Address:** 

18463 PINES BLVD

PEMBROKE PINES. FL 33029 US

FEI Number: 59-2083376 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMUELS, LEONARD 350 EAST LAS OLAS BLVD STE 1000 FT LAUDERDALE, FL 33301 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 22, 2013

**Secretary of State** 

CC9113398862

## Officer/Director Detail:

Title PMVD

Name MARINO, BRIAN T.

Address 3101 S OCEAN DR #2803 City-State-Zip: HOLLYWOOD FL 33019

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.

**PRESIDENT** 

SIGNATURE: BRIAN T. MARINO

Electronic Signature of Signing Officer/Director Detail

03/22/2013