

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L40923

Entity Name: A.B. CARBALLOSA INSURANCE AGENCY, INC.

Current Principal Place of Business:

% ALBERT CARBALLOSA
4620 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021

Current Mailing Address:

% ALBERT CARBALLOSA
4620 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 US

FEI Number: 65-0180413

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARBALLOSA, ALBERT
4620 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021 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

Officer/Director Detail :

Title D
Name CARBALLOSA, ALBERT
Address 4620 HOLLYWOOD BLVD
City-State-Zip: HOLLYWOOD FL 33021

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: ALBERT B. CARBALLOSA

PRESIDENT

01/13/2017

Electronic Signature of Signing Officer/Director Detail

Date