

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M31703

Entity Name: PHOENIX AMERICAN INSURANCE GROUP, INC.

Current Principal Place of Business:

6303 BLUE LAGOON DRIVE
SUITE 225
MIAMI, FL 33126

Current Mailing Address:

6303 BLUE LAGOON DRIVE
SUITE 225
MIAMI, FL 33126

FEI Number: 59-2786982

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PD
Name BROOKS, R. STEVEN
Address 6303 BLUE LAGOON DRIVE, SUITE,
225
City-State-Zip: MIAMI FL 33126

Title ST
Name APONTE, KATHERINE T
Address 6303 BLUE LAGOON DRIVE, SUITE
225
City-State-Zip: MIAMI FL 33126

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: KATHERINE T APONTE

SECRETARY

02/10/2016

Electronic Signature of Signing Officer/Director Detail

Date