

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M47047

Entity Name: PROPER INSURANCE AGENCY, CORP.

Current Principal Place of Business:

471 EAST 49TH STREET
HIALEAH, FL 33013

Current Mailing Address:

471 EAST 49TH STREET
HIALEAH, FL 33013

FEI Number: 59-2787876

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMOS, MARIA A
471 EAST 49 STREET
HIALEAH, FL 33013 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 P
Name RAMOS, MARIA A
Address 7499 W 34TH LN
City-State-Zip: HIALEAH FL

Title VP
Name DOYLE, JOSIE
Address 430 GOLDEN ISLES
303
City-State-Zip: HALLANDALE BCH FL 33009

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: MARIA RAMOS

PRESIDENT

03/13/2014

Electronic Signature of Signing Officer/Director Detail

Date