

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000034555

Entity Name: MASKER FINANCIAL & INSURANCE GROUP INC.

Current Principal Place of Business:

22309 SW 66 AVENUE
2502
BOCA RATON, FL 33428

Current Mailing Address:

22309 SW 66 AVENUE
2502
BOCA RATON, FL 33428 US

FEI Number: 04-3675534

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MASKER INSURANCE & FINANCIAL SERVICES
22309 SW 66 AVENUE
2502
BOCA RATON, FL 33428 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 PRES
Name MASKER, DALE A
Address 22309 SW 66 AVENUE
 # 2502
City-State-Zip: BOCA RATON FL 33428

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: DALE MASKER

PRESIDENT

06/24/2020

Electronic Signature of Signing Officer/Director Detail

Date