

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061191

Entity Name: WEST COAST INSURANCE CONSULTANTS, INC.

Current Principal Place of Business:

707 EAST 9 STREET
HIALEAH, FL 33010

Current Mailing Address:

PO BOX 520574
MIAMI, FL 33152 05

FEI Number: 20-0139519

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BATISTA, SONIA
440 SW 81 AVENUE
MIAMI, FL 33144 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 BATISTA, SONIA
Address 440 S.W. 81 AVENUE
City-State-Zip: MIAMI FL 33144

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: SONIA BATISTA

PRESIDENT

04/17/2014

Electronic Signature of Signing Officer/Director Detail

Date